

## **Vascular embolization or occlusion services to require prior authorization**

Effective November 1, 2016, certain vascular embolization or occlusion services will require prior authorization (PA) for Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan). This applies to the following procedure codes:

- 37243: Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping and imaging guidance necessary to complete the intervention; for tumors, organ ischemia or infarction
- 37244: Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping and imaging guidance necessary to complete the intervention; for arterial/venous hemorrhage or lymphatic extravasation

Noncompliance with the new requirements may result in denied claims.

Federal law, state law, state contract language and CMS guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage.

Not all PA requirements are listed here. For more information, go to <https://providers.amerigroup.com> and select **Quick Tools** from the upper right-hand corner, and then the **Precertification Look-Up Tool**. You may also call Provider Services at 1-855-878-1785.