



QUICK REFERENCE GUIDE

FOR ADVANCED IMAGING AUTHORIZATIONS

To obtain authorization for advanced imaging (CT/MRI) of the spine, you typically need to provide the following information:

1. Reason for advanced imaging
2. Onset of symptoms and description of symptoms
3. Types of conservative therapy and/or treatment* prescribed and completed by the patient
 - a. Duration of clinician directed treatment
4. Explain if there has been improvement or worsening of symptoms
5. Most recent physical examination findings
 - a. Location and description of symptoms
 - b. Presence of any neurologic deficits
6. Patient's medical, surgical, and social history
7. List other imaging/testing performed within past 6 months
 - a. X-ray
 - b. CT
 - c. EMG

*Conservative therapy and/or treatment for spine should include a multimodality approach consisting of a combination of active and inactive components. Inactive components, such as rest, ice, heat, modified activities, medical devices, acupuncture and/or stimulators, medications, injections (epidural, facet, bursal, and/or joint, not including trigger point), and diathermy can be used. Active modalities may consist of physical therapy, a physician supervised home exercise program and/or osteopathic manipulative medicine (OMT) or chiropractic care.

Disclaimer: This list is not all inclusive and prior authorization requirements are subject to change at the discretion of the insurance company and/or the administrator for the plan. Ordering clinicians should always contact the patient's insurance plan directly for current prior authorization requirements.

Learn more at
[Bayhealth.org/Neurosurgery-Referral](https://www.bayhealth.org/Neurosurgery-Referral)