

# Prior Authorization Coding Guidelines:

## Therapeutic Radiation for UnitedHealthcare Medicare Advantage Plan Members

Prior authorization may be required when delivering services to UnitedHealthcare Medicare Advantage plan members using the following codes for intensity modulation radiation treatment (IMRT), stereotactic radiosurgery (SRS) and stereotactic body radiation therapy (SBRT).

For more information, or to request prior authorization for radiation therapy, please go to [UHCprovider.com](https://UHCprovider.com) > Prior Authorization and Notification > Oncology > [Medicare Advantage Therapeutic Radiation Prior Authorization Program](#) or call UnitedHealthcare Clinical Requests at **866-889-8054**.

### IMRT CPT® and Healthcare Common Procedure Coding System (HCPCS) Codes and Descriptions

773851: Simple IMRT delivery – includes guidance and tracking when performed

773861: Complex IMRT delivery – includes guidance and tracking when performed

G6015: Intensity-modulated treatment delivery, single or multiple fields/arcs using narrow spatially and temporally modulated beams, binary, dynamic multi-leaf collimator (MLC) device per treatment session

G6016: Compensator-based beam IMRT delivery of inverse planned treatment using three or more high-resolution (milled or cast) compensators, convergent beam-modulated fields, per treatment session

### SRS and SBRT CPT and HCPCS Codes and Descriptions

77371: Radiation treatment delivery, SRS, multi-source cobalt-60-based complete course of treatment of cranial lesion(s) consisting of one session

77372: Radiation treatment delivery, SRS, linear accelerator based, complete course of treatment of cranial lesion(s) consisting of one session

77373: SBRT, treatment delivery, per fraction to one or more lesions, including image guidance, entire course not to exceed five fractions

G0173: Linear accelerator-based SRS, complete course of therapy in one session

G0251: Linear accelerator-based SRS, delivery including collimator changes and custom plugging, fractionated treatment, all lesions, per session, maximum five sessions per course of treatment

G0339: Image-guided robotic linear accelerator-based SRS, complete course of therapy in one session or first session of fractionated treatment

G0340: Image guided robotic linear accelerator based SRS, delivery including collimator changes and custom plugging, fractionated treatment, all lesions, per session, second through fifth sessions; maximum five sessions per course of treatment

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<sup>1</sup> If 77385 or 77386 are billed on a CMS-1500 form, these services will not be reimbursed.