

Subject: MRI angiography spinal canal without and with contrast, 72159		Original Effective Date: 12/13/17
Policy Number: MCR: 622	Revision Date(s):	
Review Date: 12/13/17, 12/13/18		

DISCLAIMER

This Molina Clinical Review (MCR) is intended to facilitate the Utilization Management process. It expresses Molina's determination as to whether certain services or supplies are medically necessary, experimental, investigational, or cosmetic for purposes of determining appropriateness of payment. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered (i.e., will be paid for by Molina) for a particular member. The member's benefit plan determines coverage. Each benefit plan defines which services are covered, which are excluded, and which are subject to dollar caps or other limits. Members and their providers will need to consult the member's benefit plan to determine if there are any exclusion(s) or other benefit limitations applicable to this service or supply. If there is a discrepancy between this policy and a member's plan of benefits, the benefits plan will govern. In addition, coverage may be mandated by applicable legal requirements of a State, the Federal government or CMS for Medicare and Medicaid members. CMS's Coverage Database can be found on the CMS website. The coverage directive(s) and criteria from an existing National Coverage Determination (NCD) or Local Coverage Determination (LCD) will supersede the contents of this Molina Clinical Review (MCR) document and provide the directive for all Medicare members.

DESCRIPTION OF PROCEDURE/SERVICE/PHARMACEUTICAL

Magnetic Resonance Angiography (MRA) is a non-X-ray (no ionizing radiation) imaging scan that uses a strong magnetic field and radiofrequency waves to produce detailed images of vascular structures. MRA may be performed either without or with the injection of (gadolinium) contrast material into a vein. MRA images are electronically processed to remove surrounding non-vascular anatomy, so that only the arteries or veins of interest are displayed. These vascular images can be reconstructed and rotated in different planes. MRA can sometimes replace or can be used to supplement conventional invasive catheter angiography.

APPROVAL SUPPORT

- Evaluation of known or suspected spinal arteriovenous malformation (AVM) or fistula
- Evaluation of suspected spinal cord infarction or ischemia

ADDITIONAL CRITICAL INFORMATION

The above medical necessity recommendations are used to determine the best diagnostic study based on a patient's specific clinical circumstances. The recommendations were developed using evidence based studies and current accepted clinical practices. Medical necessity will be determined using a combination of these recommendations as well as the patient's individual clinical or social circumstances.

- Tests that will not change treatment plans should not be recommended.
- Same or similar tests recently completed need a specific reason for repeat imaging.

REFERENCES USED FOR DETERMINATIONS

1. Saraf-Lavi, E., Bowen, B.C., Quencer, R.M., Sklar, E.M., Holz, A., Latchaw, R.E., . . . Wakhloo, R. (2002). Detection of spinal dural arteriovenous fistulae with MR imaging and contrast-enhanced MR angiography: sensitivity, specificity, and prediction of vertebral level. *American Journal of Neuroradiology*, 23(5), 858-867. Retrieved from <http://www.ajnr.org/content/23/5/858.long>.
2. Bowen BC, Fraser K, Kochan JP, et al, Spinal dural arteriovenous fistulas: evaluation with MR angiography, *AJNR*, 1995;16:2029-2043.
3. Backes WH and Nijenhuis RJ, *Advances in spinal cord MR angiography*, *AJM+NR*, 2008; 29:619-631.
4. Saraf-Lavi E, Bowen BC, Quencer RM, et al. Detection of spinal dural arteriovenous fistulae with MR imaging and contrast-enhanced MR angiography: Sensitivity, specificity, and prediction of vertebral level. *AJNR Am J Neuroradiol*. 2002; 23(5):858-867.
5. Mull M, Nijenhuis RJ, Backes WH, et al. Value and limitations of contrast-enhanced MR angiography in spinal arteriovenous malformations and dural arteriovenous fistulas. *AJNR Am J Neuroradiol*. 2007; 28(7):1249-1258.

CODING INFORMATION: THE CODES LISTED IN THIS POLICY ARE FOR REFERENCE PURPOSES ONLY. LISTING OF A SERVICE OR DEVICE CODE IN THIS POLICY DOES NOT IMPLY THAT THE SERVICE DESCRIBED BY THIS CODE IS COVERED OR NON-COVERED. COVERAGE IS DETERMINED BY THE BENEFIT DOCUMENT. THIS LIST OF CODES MAY NOT BE ALL INCLUSIVE.

	Description
72159	MRI angiography spinal canal without and with contrast