

Contrast Level Precertification Changes for CIGNA HealthCare – Updated

This is an important reminder about revised precertification requirements for certain high-tech radiology procedures. National Imaging Associates, Inc. (NIA)* and CIGNA HealthCare (CIGNA) continue to focus on minimizing risks to patients from radiation exposure and allergic reactions to contrast.

Effective April 28, 2008, for your CIGNA patients only, precertification requests for abdomen/pelvic CT and brain MRI became subject to specific clinical guidelines for the use of contrast material. It is important that you now note: **As of November 17, 2008, claims may be denied for payment if precertification is not obtained in adherence with the revised clinical guidelines pertaining to contrast.**

NIA and CIGNA conducted extensive analysis and identified **abdomen/pelvic CT** and **brain MRI** as two studies that can safely and accurately be performed, in most instances, without contrast enhancement. The use of contrast in conjunction with CT not only exposes the patient to an allergic reaction risk, but it also, at a minimum, doubles the radiation dose/exposure. The use of gadolinium in conjunction with an MRI study similarly exposes the patient to an allergy risk.

For CIGNA patients, NIA’s authorizations for these services will follow the guidelines below, and facility claims for the procedures must be submitted with CPT® codes corresponding to the precertifications NIA has provided.

Condition/ Precertification Guideline	CPT® Codes to Use	Patient Symptom/History
Brain MRI: Acute Headache – Approve: 1) without contrast, 2) with contrast, or 3) <i>without</i> followed by <i>with contrast</i>	70551, 70552, 70553	<ul style="list-style-type: none"> ▪ Recent neurological deficits on exam such as one-sided weakness, speech impairments, or vision defects ▪ New and sudden onset of headache less than one week not improved by medications and the headache is described as “thunderclap” or the worst headache of the patient’s life ▪ Family history (parent, sibling, or child) of stroke, aneurysm, or arteriovenous malformation (AVM)
Brain MRI: Chronic Recurring Headache – Approve: <i>without contrast</i> only	70551	<ul style="list-style-type: none"> ▪ Chronic headache presenting with a sudden change in severity, associated with exertion, or a mental status and a recent change of neurological symptoms or deficits (i.e., one-sided weakness, speech impairments, vision defects) ▪ Chronic headache with recent neurological symptoms or deficits (i.e., one-sided weakness, speech impairments, vision defects)
Brain MRI: Chronic Recurring Headache – Approve: 1) without contrast, 2) with contrast, or 3) <i>without</i> followed by <i>with contrast</i>	70551, 70552, 70553	<ul style="list-style-type: none"> ▪ A family history (parent, sibling, or child) of AVM
Abdomen CT, Abdomen/Pelvis CT Combination: Renal Calculi, Kidney Stones, Hematuria – Approve: <i>without contrast</i>	74150, 72192	<ul style="list-style-type: none"> ▪ Known or suspected renal calculi (kidney stone) or ureteral calculi (stone). Abdomen/pelvic combo would be the preferred examination ▪ Hematuria—painful (suspect kidney stones)

For additional information, contact NIA at 1-800-327-0641 or ProviderRelations@MagellanHealth.com.

*National Imaging Associates, Inc. is an affiliate of Magellan Health Services.