Medica Coverage Policy

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<th>Policy Name:</th>
<th>Coronary Computed Tomography Angiography (CCTA) for Coronary Artery Evaluation</th>
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<td>Current Policy Effective Date:</td>
<td>5/20/2015</td>
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Important Information - Please Read Before Using This Policy

These services may or may not be covered by all Medica plans. Please refer to the member’s plan document for specific coverage information. If there is a difference between this general information and the member’s plan document, the member’s plan document will be used to determine coverage. With respect to Medicare, Medicaid and MinnesotaCare members, this policy will apply unless these programs require different coverage. Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Medica coverage policy may call the Medica Provider Service Center toll-free at 1-800-458-5512.

Medica coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care and treatment.

Coverage Policy

Coronary computed tomography angiography for coronary artery evaluation is not investigative for the following indications:

A. Evaluation for coronary artery disease (CAD) in individuals without known CAD who are symptomatic for heart disease
B. Evaluation of suspected congenital anomalies of the coronary circulation
C. Evaluation of coronary or pulmonary venous or arterial anatomy for pre-surgical or pre-procedural planning
D. Evaluation of unexplained new onset heart failure for exclusion of CAD.

Coronary computed tomography angiography for coronary artery evaluation is investigative for all other indications, including, but not limited to, routine screening in asymptomatic individuals, with or without risk factors. Reliable evidence does not permit conclusions concerning its effectiveness.

Note: See related Medica Coverage policy: Coronary Artery Calcium Scoring.

Description

Computed tomography (CT) is an imaging method that combines multiple x-ray images with the assistance of a computer to produce cross-sectional views of the body. Coronary computed tomography angiography (CCTA) involves the use of multi-slice or multi-detector row CT and intravenously administered contrast material to obtain detailed images of the blood vessels of the heart. It is used as an alternative to conventional invasive coronary angiography for evaluating coronary artery disease (CAD) and coronary artery anomalies in a select population of patients.

FDA Approval

CT scanners are Class II devices. Class II devices pose little, if any risk to the consumer if performance standards are met, and do not require pre-market approval (PMA). Several scanners have received 510(k) clearance from the FDA.
Prior Authorization
Medica requires that treatment decision support, utilizing one of Medica's approved treatment decision support options, be completed prior to performing CT scans. Practitioners are advised of the treatment decision support process in their Medica Provider Administrative Manual. Services with specific coverage criteria may be reviewed retrospectively to determine if criteria are being met. Retrospective denial may result if criteria are not met.

Coding Considerations
Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only, and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

75574 - Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image post-processing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed).

Original Policy Effective Date: 6/1/2012
Re-Review Date(s): 5/20/2015