

MAGNETIC RESONANCE IMAGING (MRI)

PREAMBLE

SPECIFIC ELEMENTS

In addition to the *common elements*, the *professional component* of MRI procedures includes the following *specific elements*.

For Professional Component P

- A. Providing clinical supervision, including approving, modifying and/or intervening in the performance of the procedure where appropriate, and quality control of all elements of the *technical component* of the procedure.
- B. Performance of any clinical procedure associated with the diagnostic procedure which is not separately billable (e.g. injections which are an integral part of the study).
- C. Where appropriate, post-procedure monitoring, including intervening except where this constitutes a separately billable service.
- D. Interpreting the results of the diagnostic procedure.
- E. Providing premises for any aspect(s) of A and D that is(are) performed at a place other than the place in which the procedure is performed.

If the physician claiming the fee for the service is personally unable to perform elements A, B and C, these may be delegated to another physician, who must personally perform the service.

Element D must be personally performed by the physician who claims for the service.

OTHER TERMS AND DEFINITIONS

MRI studies of the lumbar spine should not be routinely ordered or rendered for low back pain without suspected or known pathology.

[Commentary:

Examples of suspected or known pathology include infection, tumour, osteoporosis, ankylosing spondylitis, fracture, inflammatory process, radicular syndrome, and cauda equina syndrome.]

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P

Head

X421	- multislice sequence.....	73.35
E875	- with magnetic resonance spectroscopy, to X421..... add	19.40
X425	- repeat (another plane, different pulse sequence - to a maximum of 2 repeats).	36.70
E876	- with magnetic resonance spectroscopy, to X425..... add	9.70

Payment rules:

E875 and E876 are limited to a maximum of one each per patient per *day*.

Neck

X431	- multislice sequence.....	73.35
X435	- repeat (another plane, different pulse sequence - to a maximum of 3 repeats).	36.70

Thorax

X441	- multislice sequence.....	73.35
X445	- repeat (another plane, different pulse sequence - to a maximum of 3 repeats).	36.70

Abdomen

X451	- multislice sequence.....	73.35
X455	- repeat (another plane, different pulse sequence - to a maximum of 3 repeats).	36.70

Payment rules:

X451/X455 are *not eligible for payment* when used as guidance for organ biopsy.

X480	MRI guidance of biopsy or lesion ablation, breast, unilateral	285.00
X481	MRI guidance of biopsy or lesion ablation, internal organ	285.00

Note:

X480 and X481 are *only eligible for payment* when a lesion can only be visualized by MRI or the use of another image guidance modality is not technically feasible.

[Commentary:

1. X487 and/or X499 may be eligible for payment in addition to X480 or X481.
2. Biopsy fee codes specific to the breast or internal organ may be eligible for payment in addition to X480 or X481.]

Breast - unilateral or bilateral

X446	- multislice sequence.....	73.35
X447	- repeat (another plane, different pulse sequence - to a maximum of 3 repeats).	36.70

Payment rules:

1. X446/X447 are *not eligible for payment* when used as guidance for breast biopsy.
2. X441/X445 thorax MRI is *not eligible for payment* same *day*, same physician as X446/X447.

Note:

Breast MRI is not an insured service for routine screening of an average risk individual.

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Pelvis

X461	- multislice sequence.....	73.35
X465	- repeat (another plane, different pulse sequence - to a maximum of 3 repeats).	36.70

Extremity or joint(s)

X471	- multislice sequence, one extremity and/or one joint	62.80
X475	- repeat (another plane, different pulse sequence - to a maximum of 3 repeats).	31.45
X488	- multislice sequence, two or more extremities, and/or two or more joints same extremity	108.80
X489	- repeat (another plane, different pulse sequence - to a maximum of 3 repeats).	54.35

Note:

1. X488 and X489 require imaging of two extremities or two or more joints in the same extremity during the same examination at one sitting.
2. X488 and X489 requires separate surface coil, separate imaging sequence, separate filming and separate post-processing for each joint examined.
3. For the purposes of X471, X475, X488 and X489, the following are considered eligible joints: shoulder, elbow, wrist, hip, knee and ankle.

Limited spine (one segment)

X490	- multislice sequence.....	59.50
X492	- repeat (another plane, different pulse sequence - maximum of 3 repeats).....	29.85

Intermediate spine (2 adjoining segments)

X493	- multislice sequence.....	68.45
X495	- repeat (another plane, different pulse sequence - maximum of 3 repeats).....	34.15

Complex spine (2 or more non-adjoining segments)

X496	- multislice sequence.....	101.65
X498	- repeat (another plane, different pulse sequence - maximum of 3 repeats).....	50.65
X486	- when cardiac gating is performed (must include application of chest electrodes and ECG interpretation) add 30%	
X487	- when gadolinium is used add	36.65
X499	Three Dimensional MRI acquisition sequence, including post-processing (minimum of 60 slices; maximum 1 per patient per day)	32.70

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NOT ALLOCATED