News Flash – It’s Not too Late to Give and Get the Flu Vaccine. Take advantage of each office visit and continue to protect your patients against the seasonal flu. Medicare will continue to pay for the seasonal flu vaccine and its administration for all Medicare beneficiaries through the entire flu season. The Centers for Disease Control and Prevention (CDC) recommends that patients, health care workers, and caregivers be vaccinated against the seasonal flu. Protect your patients. Protect your family. Protect yourself. Get Your Flu Vaccine - Not the Flu.

MLN Matters® Number: MM7296 REVISED Related Change Request (CR) #: 7296
Related CR Release Date: March 4, 2011 Effective Date: February 24, 2011
Related CR Transmittal #: R132NCD and R2171CP Implementation Date: April 4, 2011

Magnetic Resonance Imaging (MRI) in Medicare Beneficiaries with Implanted Permanent Pacemakers (PMs) or Implantable Cardioverter Defibrillators (ICDs)

Note: This article was updated on August 14, 2012, to reflect current Web addresses. Previously, it was revised on November 8, 2011, to add a reference to MLN® Matters Article MM7441 (http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM7441.pdf) to alert users that, effective for services on or after July 7, 2011, Medicare will cover MRIs for beneficiaries with implanted PMs when the PMs are used according to the FDA approved labeling for use in an MRI environment. Providers should follow the instructions in both MM7296 and MM7441. All other information remains the same.

Provider Types Affected

All physicians, providers and suppliers submitting claims to Medicare contractors (Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), Carriers, A/B Medicare Administrative Contractors (MACs) and Durable Medical Equipment MACs or DME MACs) for magnetic resonance imaging (MRI) services to Medicare beneficiaries are affected.

What You Need to Know

Effective for claims with dates of service on or after February 24, 2011, the Centers for Medicare & Medicaid Services (CMS) will allow for coverage of MRI for Medicare beneficiaries.
beneficiaries with implanted permanent pacemakers (PMs) or implantable cardioverter
defibrillators (ICDs) when those beneficiaries are enrolled in clinical studies that are approved
by CMS for the purpose of gaining further evidence about the utility and safety of MRI
exposure. Coverage under the Coverage with Evidence Development (CED) paradigm is
contingent on all the criteria at Section 220.2.C.1 of the Medicare "National Coverage
Determinations (NCD) Manual", being met. That section of the "NCD Manual" is attached to
CR 7296, which is available at http://www.cms.gov/Regulations-and-

CMS contractors will use existing clinical trial coding conventions to help identify on a claim
that MRI for beneficiaries with implanted PMs or ICDs was provided pursuant to a Medicare-
approved clinical study under CED. Currently, there is a clinical trial pending approval for this
purpose.

Subject to this one exception for beneficiaries in CMS-approved clinical studies with implanted
PMs or ICDs, Medicare will continue to retain the current contraindications at 220.2.C.1 in the
NCD Manual.

Background

CMS recently issued a 2010 NCD that merged the Magnetic Resonance Angiography (MRA)
NCD at Section 220.3 under the NCD for MRI at Section 220.2 in Chapter 1 of the NCD
Manual. In addition, a 2009 NCD removed a contraindication from 220.2.C.2 of the NCD
Manual concerning blood flow measurement. Currently, coverage is limited to MRI units that
have received Food and Drug Administration (FDA) premarket approval, and such units must
be operated within the parameters specified by the approval. Other uses of MRI for which
CMS has not specifically indicated national coverage or national non-coverage are at the
discretion of Medicare's local contractors.

As noted by the requester, payment for an MRI examination is not currently covered by
Medicare if certain contraindications are present. These include cardiac PMs. In June 2010,
CMS received an external request to remove the contraindications for MRI for patients with
implanted permanent PMs, as well as to provide Medicare coverage for patients who undergo
MRI with an ICD in a clinical trial setting.

As a result of the CMS review, CR7296 allows for an exception in coverage for patients in
clinical studies approved by CMS, but retains the contraindications in other circumstances.

Additional Information

The official instruction, CR7296 was issued to your FI, RHHI, A/B MAC, and/or DME/MAC via
two transmittals. The first updates "NCD Manual", and it is at
http://www.cms.gov/Regulations-and-
Guidance/Guidance/Transmittals/downloads/R132NCD.pdf on the CMS website. The
second transmittal updates Medicare Claims Processing Manual, and it is at

If you have any questions, please contact your FI, RHHI, A/B MAC, or DME MAC at their toll-free number, which may be found at http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html on the CMS website.