

Medicare National Coverage Determination (NCD)

Topic: Magnetic Resonance Imaging (MRI)

Decision: MRI is not covered for patients with metallic clips on vascular aneurysms.

An MRI is covered when used according to the FDA labeling in an MRI environment for patients with an implanted pacemaker, implantable cardioverter defibrillator (ICD) cardiac resynchronization therapy pacemaker (CRT-P), or cardiac resynchronization therapy defibrillator (CRT-D).

Any MRI for patients with an implanted pacemaker, ICD, CRT-P, or CRT-D that does not have FDA labeling specific to use in an MRI environment is only covered under the conditions stated in the NCD.

What this means: All other uses of MRI or MRA for which CMS has not specifically indicated coverage or non-coverage continue to be eligible for coverage through individual local MAC discretion.

For more information, contact Customer Service at the number listed on your ID card.

This announcement can be found at:

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2018Downloads/R208NCD.pdf>

Effective date: April 10, 2018