Medical Review Guidelines
Magnetic Resonance Imaging
Spine and Spinal Canal

Medical Guideline Number: MRG2001-04

Effective Date: 10/1/2009
Reviewed Date: 1/2003
Revised Date: 6/2005
Revised Date: 9/2008
Revised Date: 11/1/2008

OHCA Reference OAC 317:30-5-24. Radiology. (f) Magnetic Resonance Imaging. MRI /MRA scans are covered when medically necessary. Documentation in the progress notes must reflect medical necessity for the MRI.

Description:
MRI is a noninvasive diagnostic scanning technique of representing the distribution of water and other hydrogen-rich molecules in the body in the absence of ionizing radiation and in the presence of a powerful, highly uniform, static magnetic field. MRI is useful in examining the head and central nervous system abnormalities.

HCPCS CODES
72141 MRI spinal canal, cervical
72142 MRI spinal canal, cervical, with contrast
72156 MRI spinal canal, cervical, with or without contrast
72146 MRI spinal canal, thoracic
72147 MRI spinal canal, thoracic, with contrast
72157 MRI spinal canal, thoracic, with or without contrast
72148 MRI spinal canal, lumbar
72149 MRI spinal canal, lumbar, with contrast
72158 MRI spinal canal, lumbar, with or without contrast
72159 MRI spinal canal, with or without contrast

COVERED ICD-9 CODES
003.21 Salmonella meningitis
013.00-013.66 Tuberculosis of meninges and central nervous system
015.0-015.06 Tuberculosis of vertebral column
036.0 Meningococcal meningitis
045.00-045.93 Acute poliomyelitis
091.81 Acute syphilitic meningitis
094.0-094.2 Neurosyphilis
098.82 Gonococcal meningitis
100.81 Leptospiral meningitis
112.83 Candidal meningitis
114.2 Coccidioidal meningitis
115.01 Infection by Histoplasma capsulatum, meningitis
115.11 Infection by Histoplasma duboissii, meningitis
130.0 Meningoencephalitis due to toxoplasmosis
137.1 Late effects of central nervous system tuberculosis
138 Late effects of acute poliomyelitis
141.0-141.9 Malignant neoplasm of tongue
142.0-142.9 Malignant neoplasm of major salivary glands
144.0-144.9 Malignant neoplasm of floor of mouth
145.0-145.9 Malignant neoplasm of other and unspecified parts of mouth
146.0-146.9 Malignant neoplasm of oropharynx
147.0-147.9 Malignant neoplasm of nasopharynx
148.0-148.9 Malignant neoplasm of hypopharynx
149.0-149.9 Malignant neoplasm of other and ill-defined sites within the lip, oral cavity and pharynx
150.0-150.9 Malignant neoplasm of esophagus
151.0-151.9 Malignant neoplasm of stomach
152.0-152.9 Malignant neoplasm of small intestine
153.0-153.9 Malignant neoplasm of colon
154.0-154.8 Malignant neoplasm of rectum, rectosigmoid junction and anus
155.0-155.2 Malignant neoplasm of liver
156.0-156.9 Malignant neoplasm of gall bladder
157.0-157.9 Malignant neoplasm of pancreas
158.0-158.9 Malignant neoplasm of retroperitoneum and peritoneum
159.0-159.9 Malignant neoplasm of other and ill-defined sites within the digestive organs and peritoneum
160.0-160.9 Malignant neoplasm of nasal cavities, middle ear, and accessory sinuses
161.0-161.9 Malignant neoplasm of larynx
162.0-162.9 Malignant neoplasm of trachea, bronchus, and lung
163.0-163.9 Malignant neoplasm of pleura
164.0-164.9 Malignant neoplasm of thymus, heart, and mediastinum
170.0-170.9 Malignant neoplasm of bone and articular cartilage
171.0-171.9 Malignant neoplasm of connective and other soft tissue
172.0-172.9 Malignant neoplasm of skin
174.0-174.9 Malignant neoplasm of female breast
175.0-175.9 Malignant neoplasm of male breast
176.0-176.9 Kaposi’s sarcoma
179 Malignant neoplasm of uterus, part unspecified
180.0-180.9 Malignant neoplasm of cervix uteri
182.0-182.8 Malignant neoplasm of body of uterus
183.0-183.9 Malignant neoplasm of ovary and other uterine adnexa
184.0-184.9 Malignant neoplasm of other and unspecified female genital organs
185 Malignant neoplasm of prostate
186.0-186.9 Malignant neoplasm of testis
187.1-187.9 Malignant neoplasm of penis and other male genital organs
188.0-188.9 Malignant neoplasm of bladder
189.0-189.9 Malignant neoplasm of kidney and other and unspecified urinary organs
190.0-190.9 Malignant neoplasm of eye
191.0-191.9 Malignant neoplasm of brain
192.0-192.9 Malignant neoplasm of other and unspecified parts of nervous system
193 Malignant neoplasm, thyroid gland
194.0-194.9 Malignant neoplasm of other endocrine glands and related structures
196.0-196.9 Secondary and unspecified malignant neoplasm of lymph nodes
197.0-197.8 Secondary malignant neoplasm of respiratory and digestive systems
198.0-198.89 Secondary malignant neoplasm of other specified sites
199.0, 199.1 Malignant neoplasm without specification of site
199.2 Malignant neoplasm associated with transplant organ
200.00-200.88 Lymphosarcoma and reticulosarcoma
201.00-201.98 Hodgkin’s disease
202.00-202.98 Other malignant neoplasms of lymphoid and histiocytic tissue
203.00-203.81 Multiple myeloma
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>204.00-204.91</td>
<td>Lymphoid leukemia</td>
</tr>
<tr>
<td>204.92</td>
<td>Unspecified lymphoid leukemia, in relapse</td>
</tr>
<tr>
<td>205.00-205.91</td>
<td>Myeloid leukemia</td>
</tr>
<tr>
<td>205.92</td>
<td>Unspecified myeloid leukemia, in relapse</td>
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<tr>
<td>206.00-206.91</td>
<td>Monocytic leukemia</td>
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<tr>
<td>206.92</td>
<td>Unspecified monocytic leukemia, in relapse</td>
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<tr>
<td>207.00-207.81</td>
<td>Other specified leukemia</td>
</tr>
<tr>
<td>207.82</td>
<td>Other specified leukemia, in relapse</td>
</tr>
<tr>
<td>208.00-208.91</td>
<td>Leukemia of unspecified cell type</td>
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<tr>
<td>208.92</td>
<td>Unspecified leukemia, in relapse</td>
</tr>
<tr>
<td>213.2</td>
<td>Benign neoplasm of bone and articular cartilage; vertebral column, excluding sacrum and coccyx</td>
</tr>
<tr>
<td>213.6</td>
<td>Benign neoplasm of bone and articular cartilage; pelvic bones, sacrum and coccyx</td>
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<tr>
<td>215.8</td>
<td>Other benign neoplasm of connective and soft tissue, other specified sites</td>
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<tr>
<td>225.3–225.4,</td>
<td>Benign neoplasm of brain and other parts of nervous system</td>
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<tr>
<td>225.8</td>
<td>Benign neoplasm of nervous system, part unspecified</td>
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<tr>
<td>227.6</td>
<td>Benign neoplasm of aortic body and other paraganglia</td>
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<tr>
<td>237.3</td>
<td>Neoplasm of uncertain behavior of paraganglia</td>
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<tr>
<td>237.5, 237.6</td>
<td>Neoplasm of uncertain behavior of endocrine glands and nervous system</td>
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<tr>
<td>237.70–237.79</td>
<td>Neurofibromatosis</td>
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<td>238.0</td>
<td>Neoplasm of uncertain behavior of bone and articular cartilage</td>
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<td>238.1</td>
<td>Neoplasm of uncertain behavior of connective and other soft tissue</td>
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<td>238.7</td>
<td>Neoplasm of uncertain behavior of other lymphatic and hematopoietic tissues</td>
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<td>238.9</td>
<td>Neoplasm of uncertain behavior site unspecified</td>
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<td>239.0</td>
<td>Neoplasm, unspec. Nature, digestive system</td>
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<tr>
<td>239.2</td>
<td>Neoplasm of unspecified nature, bone, soft tissue and skin</td>
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<tr>
<td>239.6</td>
<td>Neoplasm of unspecified nature, brain</td>
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<tr>
<td>239.7</td>
<td>Neoplasm of unspecified nature, endocrine glands and other parts of nervous system</td>
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<tr>
<td>320.0–320.9</td>
<td>Bacterial meningitis</td>
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<td>321.0-321.8</td>
<td>Meningitis due to other organisms</td>
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<td>322.0–322.9</td>
<td>Meningitis of unspecified cause</td>
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<tr>
<td>323.81-323.82</td>
<td>Other causes of encephalitis</td>
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<td>323.9</td>
<td>Encephalitis of unspecified cause</td>
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<td>324.1</td>
<td>Intraspinal abscess</td>
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<td>326</td>
<td>Late effects of intracranial abscess or pyogenic infection</td>
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<tr>
<td>334.0-334.9</td>
<td>Spinocerebellar disease</td>
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<td>335.20</td>
<td>Motor neuron disease</td>
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<tr>
<td>336.0</td>
<td>Syringomyelia and syringobulbia</td>
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<tr>
<td>336.1</td>
<td>Other diseases of spinal cord</td>
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<tr>
<td>336.2</td>
<td>Subacute combined degeneration of spinal cord in diseases classified elsewhere</td>
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<tr>
<td>336.3</td>
<td>Myelopathy in other diseases classified elsewhere</td>
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<tr>
<td>336.8</td>
<td>Other myelopathy</td>
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<td>336.9</td>
<td>Unspecified diseases of spinal cord</td>
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<td>340</td>
<td>Multiple sclerosis</td>
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<td>341.0, 341.1, 341.8, 341.9</td>
<td>Other demyelinating diseases of central nervous system</td>
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<tr>
<td>344.00-344.09</td>
<td>Quadriplegia and quadriparesis</td>
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<tr>
<td>344.1</td>
<td>Paraplegia</td>
</tr>
<tr>
<td>344.2</td>
<td>Diplegia of upper limbs</td>
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</tbody>
</table>

Medical Review Guideline-MRI Spine
OHCA Website
344.30-344.32 Monoplegia of lower limb
344.40-344.42 Monoplegia of upper limb
344.60-344.61 Cauda equina syndrome
344.81-344.89 Other specified paralytic syndrome
344.9 Paralysis, unspecified
349.1 Nervous system complications from surgically implanted device
349.2 Disorders of meninges, not elsewhere classified
353.1 Lumbosacralplexus lesions
353.2 Cervical root lesions, not elsewhere classified
353.3Thoracic root lesions, not elsewhere classified
353.4 Lumbosacral root lesions, not elsewhere classified
720.0 Ankylosing spondylitis and other inflammatory spondylopathies
721.1 Cervical spondylosis with myelopathy
721.41-721.42 Thoracic or lumbar spondylosis with myelopathy
722.30-722.39 Schmorl’s nodes
722.70-722.73 Intervertebral disc disorder with myelopathy; lumbar region
722.81 Postlaminectomy syndrome, cervical region
722.82 Postlaminectomy syndrome, thoracic region
722.83 Postlaminectomy syndrome, lumbar region
723.0 Spinal stenosis in cervical region
723.4 Brachial neuritis of radiculitis NOS
724.00-724.09 Spinal stenosis, other than cervical; lumbar region
724.3 Sciatica
724.4 Thoracic or lumbosacral neuritis or radiculitis, unspecified
733.13 Pathological fracture of vertebrae
733.20-733.29 Cyst of bone
741.01-741.93 Spina bifida, without mention of hydrocephalus
742.51-742.59 Other specified anomalies of spinal cord
742.9 Unspecified anomaly of brain, spinal cord, and nervous system
756.12-756.17 Anomalies of spine
781.2 Abnormality of gait
781.4 Transient paralysis of limb
805.00-805.18 Fracture of vertebral column without mention of spinal cord injury, cervical
805.20-805.38 Fracture of vertebral column without mention of spinal cord injury, thoracic
805.40-805.58 Fracture of vertebral column without mention of spinal cord injury, lumbar
805.60-805.78 Fracture of vertebral column without mention of spinal cord injury, sacrum
806.00-806.19 Fracture of vertebral column with spinal cord injury, cervical
806.20-806.39 Fracture of vertebral column with spinal cord injury, thoracic
806.40-806.5 Fracture of vertebral column with spinal cord injury, lumbar
806.60-806.79 Fracture of vertebral column with spinal cord injury, sacrum and coccyx
952.00-952.09 Spinal cord injury without evidence of spinal bone injury; cervical
952.10-952.19 Spinal cord injury without evidence of spinal bone injury; thoracic
952.2 Spinal cord injury without evidence of spinal bone injury; lumbar
952.3 Spinal cord injury without evidence of spinal bone injury; sacral
952.4 Spinal cord injury without evidence of spinal bone injury; cauda equina
952.8 Spinal cord injury without evidence of spinal bone injury; multiple sites
952.9 Spinal cord injury without evidence of spinal bone injury; unspecified site
V10.85 Personal history of malignant neoplasm of brain
V10.86 Personal history of malignant neoplasm of other parts of nervous system
V1090 Personal history of unspecified malignant neoplasm
V1091 Personal history of malignant neuroendocrine tumor
**Contraindications:**
1. Patients with cardiac pacemakers or metallic clips on vascular aneurysms or other metallic implants.
2. Patients requiring life support systems and monitoring devices which employ Ferromagnetic materials (metal that could be magnetized).
3. Patients who have claustrophobia.
4. Patients who have ferrous ocular foreign bodies, imbedded shrapnel fragments or cochlear implants.

**Coding Guidelines:**
Diagnosis codes other than those listed above will require review for medical necessity and prior authorization.

**Documentation Requirements**
The ordering physician is responsible for certifying the medical necessity of the procedure. The physician must have documentation in the medical record to support the referral.

Medical records can be used in any post-payment review and must include the information necessary to substantiate the need for the procedure.

Documentation in the progress notes must reflect medical necessity for the MRI.

**Reference**
Combined LMRP – CMS website
Revised 11/17/2008: Added 199.2, 204.92, 205.92, 206.92, 207.82, 208.92 (OHCA/QAQI)
Revised 10/22/2009 – Deleted V109, Added V1090, V1091