

Subject: MUGA Scan (78472, 78473, 78474)		Original Effective Date: 12/13/17
Policy Number: MCR: 654	Revision Date(s):	
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DISCLAIMER

This Molina Clinical Review (MCR) is intended to facilitate the Utilization Management process. It expresses Molina's determination as to whether certain services or supplies are medically necessary, experimental, investigational, or cosmetic for purposes of determining appropriateness of payment. The conclusion that a particular service or supply is medically necessary does not constitute a representation or warranty that this service or supply is covered (i.e., will be paid for by Molina) for a particular member. The member's benefit plan determines coverage. Each benefit plan defines which services are covered, which are excluded, and which are subject to dollar caps or other limits. Members and their providers will need to consult the member's benefit plan to determine if there are any exclusion(s) or other benefit limitations applicable to this service or supply. If there is a discrepancy between this policy and a member's plan of benefits, the benefits plan will govern. In addition, coverage may be mandated by applicable legal requirements of a State, the Federal government or CMS for Medicare and Medicaid members. CMS's Coverage Database can be found on the CMS website. The coverage directive(s) and criteria from an existing National Coverage Determination (NCD) or Local Coverage Determination (LCD) will supersede the contents of this Molina Clinical Review (MCR) document and provide the directive for all Medicare members.

DESCRIPTION OF PROCEDURE

Multiple-gated acquisition (MUGA) scanning is a non-invasive nuclear test that measures the left ventricular ejection fraction (LVEF), a measure of overall cardiac function. It may also detect areas of poor contractility following an ischemic episode and it is used to evaluate left ventricular hypertrophy.

APPROVAL SUPPORT

- Baseline left ventricular (LV) function before chemotherapy or cardiotoxic therapy; may Repeat left ventricular (LV) function prior to subsequent chemotherapy cycles
- Congestive Heart Failure (CHF), when prior cardiac imaging has proven inadequate for an accurate determination of ejection fraction.
- Coronary artery disease (CAD) when a patient is obese and neither Nuclear Stress nor Pet(Cardiac) Stress can be done
- Chronic Obstructive Pulmonary Disease (COPD), and neither Nuclear Stress nor Pet (Cardiac) Stress can be done

NOTE: MUGA 78472 or 78473 may be done as subset of a Nuclear Stress Test but it will not have as good a detail on LVEF measure as MUGA, and is billed under the primary CPT Code (Nuclear Stress Test) 78452.



ADDITIONAL INFORMATION

The above medical necessity recommendations are used to determine the best diagnostic study based on a patient's specific clinical circumstances. The recommendations were developed using evidence based studies and current accepted clinical practices. Medical necessity will be determined using a combination of these recommendations as well as the patient's individual clinical or social circumstances.

- Tests that will not change treatment recommendations should not be approved.
- Tests completed recently need a specific reason for repeat

CODING INFORMATION: THE CODES LISTED IN THIS POLICY ARE FOR REFERENCE PURPOSES ONLY. LISTING OF A SERVICE OR DEVICE CODE IN THIS POLICY DOES NOT IMPLY THAT THE SERVICE DESCRIBED BY THIS CODE IS COVERED OR NON-COVERED. COVERAGE IS DETERMINED BY THE BENEFIT DOCUMENT. THIS LIST OF CODES MAY NOT BE ALL INCLUSIVE.

CPT	Description
78472	MUGA scan, rest
78473	MUGA scan, exercise
78474	MUGA scan

REFERENCES USED FOR DETERMINATIONS

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