Minnesota Reimbursement At-A-Glance

100% Covered Lives

PAYOR	FFR_{CT} COVERAGE	cCTA PA REQUIRED	FFR_{CT} PA REQUIRED	AI-CPA PA REQUIRED	cCTA and FFR_{CT} MEDICAL POLICY LINK	RADIOLOGY BENEFITS MANAGER (RBM)
Blue Cross Blue Shield Minnesota	Yes	Yes	Yes	Yes	BCBS MN FFRCT	Availty
Medica Health Plan	Yes	Yes	Yes	Yes	Medica Carelon Imaging of the Heart	Carelon
Cigna	Yes	No	No	Yes	Cigna eviCore Cardiac Imaging Guidelines	eviCore
Department of Veterans Affairs Health Plan	Conditional	No	No	Unknown	No Known Policy	None
United Healthcare	Yes	Yes	Auto	Yes	UHC Cardiology and Radiology Imaging Guidelines	eviCore
Aetna	Yes	Yes	Auto	Yes	Aetna Cardiac CT, cCTA, Calcium Scoring and FFRct	eviCore
BCBS Federal Employee Plan	Yes	Yes	Yes	Yes	BCBS FEP cCTA with Selective Noninvasive FFR BCBS FEP Contrast-Enhanced CTA for Coronary Artery Evaluation	None
Medicaid	Yes	Yes	No	Yes	No Known Policy	None
MAC: NGS Jurisdiction 6	Yes	No	No	No	NGS LCD ID: L39075 Non-Invasive FFR	None