

Oregon 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)
Aetna	Yes	Yes	Auto	Yes	eviCore Cardiac Imaging Guidelines	eviCore
Providence Health Plan	Yes	Yes	No	Yes	Providence Health Plan Prior Auth List Carelton Advanced Imaging Guidelines	Carelton
Regence	Yes	Yes	Yes	Yes	Carelton Advanced Imaging Guidelines	Carelton
Department of Veterans Affairs Health Plan	Conditional	No	No	Unknown	No Known Policy	None
PacificSource	Yes	No	No	Yes	Carelton Advanced Imaging Guidelines	Carelton
Moda Health	Yes	Yes	Yes	Yes	eviCore Cardiac Imaging Guidelines	eviCore
Oregon Health Plan	Yes	No	No	Yes	Medical Coverage Policy	None
MAC: Noridian Jurisdiction F	Yes	No	No	No	Noridian LCD ID: L38615 Non-invasive FFR Noridian LCD ID: L39883 AI-CPA	None