Utah 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)
Select Health	Yes	Yes	Yes	Yes	Select Health PA Link	None
Regence Blue Cross Blue Shield Utah	Yes	Yes	Yes	Yes	Carelon Imaging of the Heart Medical Guidelines	Carelon
Aetna	Yes	Yes	Auto	Yes	Aetna Cardiac CT, cCTA, Calcium Scoring and FFRct Aetna eviCore Cardiac Imaging Guidelines	eviCore
United Healthcare	Yes	Yes	Auto	Yes	UHC Cardiovascular and Radiology Imaging Guidelines	None
Cigna	Yes	No	No	Yes	Cigna Medical Coverage Policies – Radiology Cardiac Imaging Guidelines	eviCore
HealthNet (Centene Corporation)	Yes	Yes	Yes	Yes	Evolent Expanded Cardiac Guidelines	Evolent
BCBS Federal Employee Plan	Yes	No	No	Yes	BCBS FEP cCTA with Selective Noninvasive FFR BCBS FEP Contrast-Enhanced CTA for Coronary Artery Evaluation	None
Department of Veterans Affairs Health Plan	Yes	No	No	Unknown	No Known Policy	None
MAC: Noridian Jurisdiction F	Yes	No	No	No	Noridian LCD ID: L38613 Non-Invasive FFR Noridian LCD ID: L39881 AI-CPA	None