



Medica Central Coverage Policy

Policy Name: Upright Magnetic Resonance Imaging (MRI) (Standing/Seated/Weight Bearing/Positional MRI) MP9742

Effective Date: 08/01/2024

Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica Central plans. Coverage is subject to requirements in applicable federal or state laws. Please refer to the member's plan document for other specific coverage information. If there is a difference between this general information and the member's plan document, the member's plan document will be used to determine coverage. With respect to Medicare, Medicaid, and other government programs, this policy will apply unless these programs require different coverage.

Members may contact Medica Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions may call the Provider Service Center. Please use the Quick Reference Guide on the Provider Communications page for the appropriate phone number. <https://mo-central.medica.com/Providers/SSM-employee-health-plan-for-IL-MO-OK-providers>

Medica Central coverage policies are not medical advice. Members should consult with appropriate health care providers to obtain needed medical advice, care, and treatment.

Coverage Policy

Note: This policy is no longer scheduled for routine review of the scientific literature.

Upright magnetic resonance imaging (MRI), also called standing, seated, weight bearing, vertical, or positional MRI, is investigative and unproven and therefore **NOT COVERED**. There is insufficient reliable evidence in the form of high-quality peer-reviewed medical literature to establish the efficacy or effects on health care outcomes.

Description

Magnetic resonance imaging (MRI) traditionally involves imaging a patient who is lying down on an examination table that slides into the MRI unit. Upright MRI allows a patient to be imaged in various weight-bearing positions (sitting, standing, bending or twisting) that replicate axial loading of the spine during normal activities, including the position where the individual experiences the pain or symptoms. The upright MRI was not designed for claustrophobic individuals, but because there is no obstructing enclosure, it is also used for that reason. Most conventional MR scanners in clinical use have a magnetic field strength of 1.5-3.0 Tesla. Upright MRI scanners have a magnetic field strength of 0.35-0.6 Tesla, which produces a poorer-quality image compared to the conventional MRI scanners.

FDA Approval

The U.S. Food and Drug administration has approved upright MRI devices through a 510(k) process including the FONAR™ Upright™ MRI (FONAR Corp.) and the GE 0.35T Signa® Ovation with Excite Magnetic Resonance System (GE Medical Systems). Several low-field devices have



Medica Central Coverage Policy

been approved by the FDA for extremity MRI. These include the G-Scan and G-Scan Brio, Artoscan™-C; C-Scan™; and E-Scan™ XQ.

Prior Authorization

Prior authorization is not applicable. Claims for this service are subject to retrospective review and denial of coverage, as investigative services are not eligible for reimbursement.

Coding Considerations

Use the current applicable CPT/HCPCS code(s). The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.

CPT Codes

- **76498** - Unlisted magnetic resonance procedure (e.g., diagnostic, interventional).

| | Committee/Source | Date(s) |
|--------------------------|---|------------------|
| Document Created: | Medical Policy Committee/Health Services Division | January 17, 2024 |
| Revised: | Medical Policy Committee/Health Services Division | July 17, 2024 |
| Reviewed: | Medical Policy Committee/Health Services Division | July 17, 2024 |

Published: 08/01/2024

Effective: 08/01/2024

©2024 Medica.