

Updates to Carelon Medical Benefits Management Advanced Imaging Clinical Appropriateness Guidelines

Effective April 9, 2023

Effective for dates of service on and after April 9, 2023, the following updates will apply to the Carelon Medical Benefits Management Advanced Imaging Clinical Appropriateness Guidelines. As part of the Carelon Medical Benefits Management guideline annual review process, these updates are focused on advancing efforts to drive clinically appropriate, safe, and affordable health care services.

Updates by Guideline

Imaging of the Brain

- Meningioma – Added more frequent surveillance for WHO grade II/III
- Bell's palsy – Limited the use of CT to scenarios where MRI cannot be performed
- Seizure disorder – Added indication for advanced imaging in pediatric patients with nondiagnostic EEG

Imaging of the Head and Neck

- Perioperative imaging – Added indication for imaging prior to facial feminization surgery

Imaging of the Chest

- Perioperative imaging – Added indication for imaging prior to lung volume reduction procedures
- Imaging abnormalities – Added indication for evaluation of suspected tracheal or bronchial pathology

Imaging of the Abdomen/Pelvis

- Uterine leiomyomata – Added indication for advanced imaging when US suggests leiomyosarcoma
- Pancreatic indications – Added indication for pancreatic duct dilatation
- Pancreatic mass – Added allowance for more frequent follow up of lesions with suspicious features or in high-risk patients
- Pancreatitis – Removed allowance for MRI following nondiagnostic CT
- Pelvic floor disorders – Added indication for MRI pelvis in chronic constipation when preliminary testing is nondiagnostic
- Abdominal/pelvic pain, undifferentiated – Removed indication for MRI following nondiagnostic CT

Oncologic Imaging

- NCCN annual alignments for breast cancer screening and the following: cervical, head & neck, histiocytic neoplasms, lymphoma (non-Hodgkin & leukemia), multiple myeloma, thoracic, and thyroid cancers
- Prostate cancer:
 - Updated respective conventional imaging prerequisites for 18F Fluciclovine/11C PET/CT and 68Ga PSMA/18F-DCFPyL PET/CT, based on utility of conventional imaging at various PSA thresholds (and removal of low-risk disease waiver from conventional imaging footnote).
 - Addition of 68Ga PSMA or 18F-DCFPyL PET/CT indication aligned with FDA-approved use of Pluvicto (radioligand) treatment for metastatic castrate-resistant disease

For questions related to guidelines, please contact Carelon Medical Benefits Management via email at MedicalBenefitsManagement.guidelines@carelon.com. Additionally, you may access and download a copy of the current and upcoming guidelines at guidelines.carelonmedicalbenefitsmanagement.com/.