

PROVIDER BULLETIN

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TOPIC: Magnetic Resonance Imaging (MRI)

An MRI should be a tool to answer a specific diagnostic question and not a substitute for performing an appropriate clinical evaluation of a patient. Imaging requests should include relevant clinical information (brief history, symptoms and signs), a provisional diagnosis, and at times a specific question to be answered, which will help the radiologist to focus attention on the area of concern.

Injured workers presently undergo MRI scanning in a number of facilities and locations around the state and often then take these same films to specialists to review as part of their evaluation and treatment direction. It is therefore imperative that these films be of the best possible quality.

At the present time, the Division of Workers' Safety and Compensation does not yet require preauthorization for MRI's. However, the Division has become concerned with what appears to be the *routine* duplication of previously performed studies on the same patients by some of these specialists. There is no excuse for this practice. Rescanning is justified only if the initial study has obvious significant deficiencies: e.g., machine artifact, patient movement, slices too thick, poor resolution, and study interpretation which is discrepant with observed clinical findings. If these deficiencies are present and would preclude making an accurate diagnosis and adversely affect patient care, the HCP should clearly document in the medical record the exact nature of the problem in detail sufficient to justify the need for a repeat imaging study.

The Division will monitor these comments regarding film quality and requests for additional scanning. Also, the Division will note feedback from physicians conducting preauthorization reviews and independent medical evaluations regarding the quality of the imaging that they review.

Should there be consistent patterns of reportedly poor quality studies from specific locations, leading to additional studies being obtained, the Division will conduct an independent physician review of both studies. If initial imaging studies from a specific location consistently remain substandard, they may not be reimbursed. On the other hand, if repeat studies are of only equal or even lesser quality than the initial criticized studies, they also may not be reimbursed.

The Division's prime concern is that injured workers receive the best quality, most focused and expeditious care, which requires that the diagnostic workup also be performed in an efficient and appropriate manner.

If you have any questions, please contact the Division's preauthorization unit at 307-777-3630.

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