

**CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR MYOCARDIAL PERFUSION IMAGING (MPI)**

Applies to: Commercial - HMO  POS  PPO  Medicare Advantage

Network list: <https://wa-provider.kaiserpermanente.org/communications/letters>

**Effective February 1, 2024**, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) is updating indications for exercise nuclear stress test and pharmacologic nuclear stress test for non-Medicare criteria and updating the review requirement for Medicare Advantage members.

**Explanation of the change:**

Non-Medicare clinical review criteria for exercise nuclear stress test and pharmacologic nuclear stress test indications have been revised. In addition, there is an added requirement for a member to complete a non-diagnostic stress echo or a non-diagnostic Dobutamine stress echo, unless contraindicated, prior to an MPI. Please refer to the clinical review criteria below for specific medical necessity requirements.

To align with the CMS final Rule (42 CFR), Medicare Advantage members will now require prior authorization and clinical review using the Medicare LCD L36889 for this service.

Clinical review criteria and affected CPT codes can be found on the Kaiser Permanente provider website at: [https://wa-provider.kaiserpermanente.org/static/pdf/hosting/clinical/criteria/pdf/myocardial\\_perfusion\\_imaging.pdf](https://wa-provider.kaiserpermanente.org/static/pdf/hosting/clinical/criteria/pdf/myocardial_perfusion_imaging.pdf)

**Is prior authorization required?**

- KFHPWA Health Maintenance Organization (HMO) members: Prior authorization is required.
- KFHPWAO Point of Service (POS) members: Prior authorization is required for in-network coverage.
- KFHPWAO Preferred Provider Organization (PPO) members: Prior authorization is not required.
- Medicare Advantage: Prior authorization is required.

Questions: Contact Provider Assistance Unit at 1-888-767-4670, Monday through Friday, 8 a.m. to 5 p.m.

**Kaiser Foundation Health Plan of Washington**  
**Kaiser Foundation Health Plan of Washington Options, Inc.**

<CONTRACT MANAGER NAME>

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