Important Information – Please Read Before Using This Policy

These services may or may not be covered by all Medica plans. Please refer to the member’s plan document for 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 and Minnesota Health Care Programs, this policy will apply unless those 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 about this Medica coverage policy may call the Medica Provider Service Center toll-free at 1-800-458-5512.

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

Coverage Policy
Magnetic resonance spectroscopy is COVERED for the following indications:
- Distinguishing low grade from high grade gliomas
- Distinguishing recurrent or residual brain tumor from post-therapy changes (e.g., radiation-necrosis).

Magnetic resonance spectroscopy is investigative and therefore NOT COVERED for all other indications. There is insufficient reliable evidence in the form of high quality peer-reviewed medical literature to establish the effects on health care outcomes.

Description
Magnetic Resonance Spectroscopy (MRS) is a non-invasive imaging technique that can detect and measure concentrations of low molecular weight chemicals within living body tissues. MRS provides direct in vivo biochemical information from the tissue of choice and is, therefore, a reflection of the underlying molecular processes. The primary difference between Magnetic Resonance Imaging (MRI) and MRS is that MRS detects the chemical composition of the tissue, while MRI provides an image of the anatomy. MRS has been investigated as an analytical tool to study metabolic changes in brain tumors, stroke, Alzheimer’s disease, and epilepsy.

FDA Approval
Magnetic resonance spectroscopy (MRS) devices are regulated by the FDA as Class II devices and fall under product code LNI. Several devices have been approved via the FDA 510(k) process.

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
- 76390 – Magnetic resonance spectroscopy
- 0609T – Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); acquisition of single voxel data, per disc, on biomarkers (i.e., lactic acid, carbohydrate, alanine, laal, propionic acid, proteoglycan, and collagen) in at least 3 discs
- 0610T – Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); transmission of biomarker data for software analysis
- 0611T – Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); post processing for algorithmic analysis of biomarker data for determination of relative chemical differences between discs
- 0612T – Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); interpretation and report

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                      6/17/2015
                      6/20/2018
                      2/19/2020 – administrative update; format
                      7/1/2020 – administrative update: codes added