CONTRAST MEDIA – IONIC (HIGH OSMOLALITY) AND NONIONIC (LOW OSMOLALITY) RAD601.004

COVERAGE:

The use of low or high osmolality contrast media (agents) for intravascular injection is eligible for coverage.

DESCRIPTION:

Contrast material (agents) are drugs utilized during radiological procedures designed to enhance visualization of blood vessels and organs. New contrast agents have been developed that are lower in osmolality and ionization than conventional materials. Osmolality is the concentration of particles in solution which affects the movement of fluid in and out of cells. Low osmolality materials are theorized to cause fewer adverse reactions because they cause less fluid movement in and out of the tissues in which they come in contact.

Contrast agents should be selected carefully for each patient taking identified risk factors for severe reactions into consideration.

The following are recognized as risk factors:

• Renal factors:
  ▪ pre-existing renal impairment (serum creatine of 1.5 mg/dl or higher);
  ▪ multiple myeloma;

• Cardiovascular factors:
  ▪ age under 1 year;
  ▪ unstable angina;
  ▪ severe congestive failure (New York Heart Association Functional Class IV);
  ▪ recurrent ventricular tachycardia;
  ▪ ejection fraction under 0.30;
  ▪ severe pulmonary hypertension;
  ▪ cardiogenic shock or other demodynamic instability;
  ▪ within six months of an acute myocardial infarction complicated by hypotension;
  ▪ left main coronary artery stenosis greater than 50%;
  ▪ severe aortic stenosis, symptomatic; and
• ventricular septal defect.

• Allergy:
  • history of previous significant allergic reaction to iodine containing ionic contrast material.

Patients with a susceptibility to allergies and/or a history of prior reaction to contrast media are candidates for corticosteroid pretreatment when the radiologic examination is a covered benefit.

RATIONALE:
Reactions to both high osmolality and low osmolality contrast agents have been reported. All of the risk factors listed in the policy merit consideration in the evaluation and utilization of a contrast media.

DISCLAIMER:
State and federal law, as well as contract language, including definitions and specific inclusions/exclusions, takes precedence over Medical Policy and must be considered first in determining coverage. The member’s contract benefits in effect on the date that services are rendered must be used. Any benefits are subject to the payment of premiums for the date on which services are rendered. Medical technology is constantly evolving, and we reserve the right to review and update Medical Policy periodically. HMO Blue Texas physicians who are contracted/affiliated with a capitated IPA/medical group must contact the IPA/medical group for information regarding HMO claims/reimbursement information and other general polices and procedures.