

PROVIDER PLAYBOOK



MRI of the Lumbar Spine without Contrast

eviCore wants to collaborate with providers to ensure your patients receive high-quality, medically appropriate care when and where they need it. Our Provider Playbook series is designed to help achieve that goal by looking at some of the most common inappropriately ordered tests we see and providing information from current evidence-based medical literature to support the delivery of the right care every time.

The Problem: Lower Back Pain

Lower back pain is the fifth most common reason for all physician visits. Statistics also show that most adults—about 80 percent—will experience lower back pain at some point during adulthood, so it’s likely a routine concern you hear from your patients.

When Is Imaging Appropriate?

Most lower back pain is caused by benign processes that will generally resolve within a matter of weeks with provider-directed conservative therapy such as pain-relieving medication, physical therapy, or stretching and/or strengthening exercises. (Read more about treating lower back pain [here](#)¹.) In these instances, imaging, such as an MRI of the lumbar spine, is not typically appropriate, but it’s still frequently ordered. However, for several scenarios the evidence suggests that imaging is warranted, even prior to completing 6 weeks of conservative therapy.

Patient's Presentation	Imaging Likely Appropriate
Patient has tried fewer than 6 weeks of conservative therapy	●
Patient has tried 6 weeks of conservative therapy under your care, which may include physical therapy, pain medication, or strengthening and stretching exercises, and is still experiencing pain.	●
At any time (i.e., does not require 6 weeks of conservative therapy)...	
Patient has a history of cancer	●
Patient has recently been diagnosed with or is suspected to have an infection (e.g., running a fever) along with his/her back pain	●
Patient is experiencing neurological symptoms that may include progressive motor weakness in their legs or urinary retention/incontinence	●
Patient has been diagnosed with aortic aneurysm or dissection	●
Patient has a previously diagnosed fracture involving his/her spine area and the level of back pain has increased	●
Patient has a recent history of significant trauma or is osteoporotic with a suspected fracture	●
Patient is experiencing severe radicular pain that radiates into the lower extremity directly along the course of a spinal nerve root	●
Patient has been diagnosed with Cauda Equina Syndrome	●

Submitting a Prior Authorization Request

If your patient has already undergone 6 weeks of conservative treatment under your care and their back pain is still present, or if your patient is showing signs of any of the red flags listed above*, you'll need to submit a prior authorization request for advanced imaging. When you are building your prior authorization request, those red flags should be clearly identified so the eviCore clinician reviewing your request can help you ensure your patient gets the right test to address his or her lower back pain.

*For a full list of red flags for lower back pain that may indicate a more serious health issue, as well as additional evidence-based information, view the following resources:

- eviCore Guidelines: Click [here](#)².
- American College of Radiology Guidelines: Click [here](#)³.
- American Academy of Family Physicians Guidelines: Click [here](#)⁴.

What Is the Most Appropriate Imaging Test?

Patient's Presentation	Likely Best Imaging Test
Non-traumatic lower back pain with failure of documented conservative care and without previous surgery, suspected infection or cancer	Usually MRI Lumbar Spine Without contrast (CPT® 72148)
Patient has experienced trauma or is osteoporotic with a suspected fracture	First order an X-ray and, depending on the clinical circumstances and findings, an MRI Lumbar Spine Without Contrast (CPT® 72148) or CT Lumbar Spine Without Contrast (CPT® 72131) may be indicated
Severe or progressive neurologic deficit and one or more red flags	Depending on the clinical circumstances, an MRI Lumbar Spine Without Contrast (CPT® 72148) or an MRI Lumbar Spine Without and With Contrast (CPT® 72158) may be indicated

Information to Share With Patients

According to the American Association of Family Physicians, imaging of the lower spine before 6 weeks does not improve the patient's health outcomes, but it does increase costs. Research shows that patients who received advanced imaging before trying more conservative care—including physical therapy—incurred higher costs by an average of \$4,800. And often, the findings in imaging—including disc degeneration, arthritis, bulging discs—may not identify the source of your patient's lower back pain. These unrelated findings may cause the patient to undergo additional treatment and assume additional costs for a condition that isn't causing the patient any pain or medical distress.

The Choosing Wisely campaign provides additional resources to help patients understand when imaging is appropriate for lower back pain: Click [here](#)⁵ for more information.

Identifying when lower back pain requires advanced imaging for a diagnosis is one area where eviCore seeks to partner with you to ensure your patients receive high-quality, medically appropriate care when and where they need it.

Learn more about eviCore's purpose and commitment to a partnership with providers at <https://www.evicore.com/insights>.

Sources

¹ <https://www.evicore.com/insights/65>

² https://www.evicore.com/referenceguidelines/15_2018-spine.pdf

³ <https://www.ncbi.nlm.nih.gov/pubmed/27496288>

⁴ <http://www.choosingwisely.org/clinician-lists/american-academy-family-physicians-imaging-low-back-pain/>

⁵ <http://www.choosingwisely.org/patient-resources/imaging-tests-for-back-pain/>