**MRI of the Lumbar Spine**

Providers can expedite a request by submitting a prior authorization request through e-referral and completing the appropriate questionnaire. If all questions are answered, e-referral will determine the status of the case based on the provider’s response. If the case pending and BCN cannot authorize it, BCN will contact the provider for additional clinical information.

<table>
<thead>
<tr>
<th>Code***</th>
<th>Description</th>
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<tbody>
<tr>
<td>72148</td>
<td>Magnetic resonance (e.g., proton) imaging, spinal canal and contents, lumbar; without contrast material</td>
</tr>
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<td>72149</td>
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</tr>
<tr>
<td>72158</td>
<td>Magnetic resonance (e.g., proton) imaging, spinal canal and contents, lumbar; without contrast material followed by contrast material and further sequences</td>
</tr>
</tbody>
</table>

1. Does the patient have:
2. LBP with **MILD** neurologic symptoms* AND not responsive to conservative measures (acetaminophen or non-steroidal anti-inflammatory drugs [NSAIDs], limiting activities that aggravate symptoms, physical therapy) > 4 weeks? □ Yes □ No
3. LBP with **MILD** neurologic symptoms* AND worsening clinical symptoms? □ Yes □ No
4. LBP with **MILD** neurologic symptoms* AND loss of motor strength (muscle weakness in the legs)? □ Yes □ No
5. LBP with **MAJOR** neurologic symptoms**? □ Yes □ No
6. LBP with any of the following: fever; elevated WBCs; unexplained weight loss; history of IV drug or steroid abuse, osteoporosis, lumbar spine surgery; immunosuppression (transplant, radiation, chemotherapy, steroid medications, HIV, etc.); age > 70? □ Yes □ No
7. SEVERE LBP not relieved with changes in body position? □ Yes □ No
8. SEVERE LBP that interferes with completion of activities of daily living (e.g., not able to go to work or may be able to work but needs to take frequent breaks due to pain)? □ Yes □ No
9. SEVERE LBP WITH failure of conservative treatment, for AT LEAST 3 DAYS, of (unless contraindicated OR not tolerated) BOTH an appropriate non-steroidal anti-inflammatory drug AND an opiate drug (e.g., morphine, codeine, oxycodone, hydrocodone, etc.)? □ Yes □ No
10. Abnormal prior imaging study? MRI recommended. □ Yes □ No
11. Significant spine trauma, with symptoms: any age? □ Yes □ No
12. Mild spine trauma with symptoms: age > 70? □ Yes □ No
13. Is the patient a pediatric patient (under 18 years old) with congenital anomaly (birth defect)? □ Yes □ No
14. Is the MRI being ordered for multiple sclerosis (confirmed diagnosis; not to rule out the diagnosis) to evaluate spinal lesions/plaques and/or to assess the treatment plan? □ Yes □ No
15. Is this imaging procedure being performed to rule out cancer, to rule out metastasis or for ongoing cancer surveillance (monitoring) of a previously identified cancer? □ Yes □ No
16. * **Mild** neurologic symptoms: numbness & tingling, with/without radiating pain (sciatica) □ Yes □ No
17. ** **Major** neurologic symptoms: loss of motor strength, foot drop, loss of bowel or bladder function □ Yes □ No

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