

Tennessee FFR_{CT} Coverage & Prior Authorization (PA) At-A-Glance



100% Covered Lives*

PAYOR	FFR _{CT} COVERAGE	cCTA PA REQUIRED	FFR _{CT} PA REQUIRED	Plaque PA REQUIRED	cCTA and FFR _{CT} MEDICAL POLICY LINK	RADIOLOGY BENEFITS MANAGER (RBM)
BCBS of Tennessee	Yes	Yes	No	N/A	BCBS TN Noninvasive FFR Measurement Policy	eviCore
					BCBS TN cCTA Policy	
Cigna	Yes	No	No	N/A	Cigna Medical Coverage Policies – Radiology Cardiac Imaging Guidelines	eviCore
Aetna	Yes	Yes	Auto	N/A	Aetna Cardiac CT, cCTA, Calcium Scoring and FFRct	eviCore
					Aetna eviCore Cardiac Imaging Guidelines	
Department of Veterans Affairs Health Plan	Conditional	No	No	N/A	No Known Policy	None
United Healthcare	Yes	Yes	Auto	N/A	UHC Cardiology and Radiology Imaging Guidelines	None
BCBS Federal Employee Plan	Yes	No	No	N/A	BCBS FEP cCTA with Selective Noninvasive FFR	None
					BCBS FEP Contrast-Enhanced CTA for Coronary Artery Evaluation	
Humana	Yes	Yes	No	N/A	Humana cCTA, FFRct, CACS Guidelines	HealthHelp
					HealthHelp CTA Heart cCTA Medical Guidelines	
Centene Corporation (Ambetter)	Yes	Yes	Yes	N/A	Centene NIA Expanded Cardiac Guidelines	Evolent
MAC: Palmetto Jurisdiction J	Yes	No	No	N/A	Palmetto LCD Non-Invasive FFR for Stable Ischemic Heart Disease	None
					Palmetto LCD Cardiac Computed Tomography & Angiography (cCTA)	
TN Medicaid	Yes	N/A	N/A	N/A	N/A	None