

# Use of Cardiac Magnetic Resonance Angiography in Adults and Children

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Draft Evidence Report:  
Public Comment and Response

*October 20, 2021*

**Health Technology Assessment Program (HTA)**

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## Responses to Public Comments on Draft Report

*The Center for Evidence-based Policy is an independent vendor contracted to produce evidence assessment reports for the Washington Health Technology Assessment (HTA) program. For transparency, all comments received during the public comment period are included in this response document. Comments related to program decisions, process, or other matters not pertaining to the evidence report are acknowledged through inclusion only.*

Public comments were received from these individuals and organizations:

- Thomas P. Power, MD, MBA, FACC, MRCPI, National Medical Director (Cardiology and Sleep Programs), AIM Specialty Health

Specific responses pertaining to comments are shown in Table 1.

The full text of all public comments and included references and attachments follows the tables.

**Table 1. Responses to Comments on Draft Report on the Use of Cardiac Magnetic Resonance Angiography in Adults and Children**

Comments		Response
<p><b>Commenter:</b> Thomas P. Power, MD, MBA, FACC, MRCPI, National Medical Director (Cardiology and Sleep Programs), AIM Specialty Health</p>		
<p><b>General Comments:</b></p>		
<p>Dear Washington State Health Care Authority,                      Thank you for the opportunity to comment on the Washington State Health Care Authority Draft Evidence Report titled “Use of Cardiac Magnetic Resonance Angiography in Adults and Children” dated August 30, 2021. We respectfully suggest the following:  <i>[See specific comments below]</i>                      Again, thank you for the opportunity to comment on the document. We would be happy to discuss the above comments in more detail if needed.</p>		<p>Thank you for your comments. Please see responses to your specific comments below.</p>
<p><b>Specific Comments:</b></p>		
<p><b>Terminology</b></p>	<ul style="list-style-type: none"> <li>Under the heading Technology of Interest on page 8, the following sentence may give rise to some confusion “Cardiac magnetic resonance angiography (CMRA) is a specific CMR imaging (CMRI) technique for assessing the carotid arteries, aorta, renal arteries, and peripheral vasculature.” While cardiac studies may evaluate some extracardiac structures adjacent to the heart, evaluation of the carotids, renal arteries and peripheral vasculature would require separate studies of those anatomic areas.</li> </ul>	<p>We have amended this in line with your suggestion.</p>
<p><b>Terminology</b></p>	<ul style="list-style-type: none"> <li>In some instances both cardiac MRI and cardiac MRA are used seemingly interchangeably. For example, on page 11 under the heading KQ1 and KQ2, the first bullet outlines the sensitivity of CMRA. Subsequent bullets then address the risk benefit balance of CMRI. We have some concerns that this switching of terms may confuse readers.</li> </ul>	<p>In light of this and other comments, we have removed the studies solely evaluating CMRI (not CMRA) to avoid confusion over terms and inappropriate interpretation of the literature.</p>
<p><b>Terminology</b></p>	<ul style="list-style-type: none"> <li>The use of the term Cardiac Magnetic Resonance Angiography (CMRA) in the title and throughout the document may also be a source of confusion. There is currently no AMA CPT code for CMRA. There are several cardiac MRI codes for reporting contrast and non-contrast studies, stress studies and flow velocity mapping. Use of the term CMRA introduces some ambiguity in that it is not clear which specific service is under discussion. For example, you find that “CMRA” is useful in the evaluation of adult patients with suspected coronary anomalies. Most providers who would use MR in that scenario would refer to the study as cardiac MRI not cardiac MRA. Furthermore, the billing for imaging in that scenario would cite a cardiac MRI code 75557 or 75561. We would recommend that you consider using the term CMRI rather than CMRA.</li> </ul>	<p>The report is focused on CMRA so we have used this term specifically to avoid any confusion with CMRI more generally. Please also see responses to your other comments on terminology.</p>

*Abbreviations. CMRA: cardiac magnetic resonance angiography; CMRI: cardiac magnetic resonance imaging; KQ: key question.*