

Updates to AIM Specialty Health advanced imaging *Clinical Appropriateness Guidelines*

Effective for dates of service on and after December 19, 2020, the following updates will apply to the AIM Specialty Health®* advanced imaging of the chest, vascular imaging and AIM oncologic imaging *Clinical Appropriateness Guidelines*.

Vascular imaging updates by section

- Aneurysm of the abdominal aorta or iliac arteries:
 - Added new indication for asymptomatic enlargement by imaging
 - Clarified surveillance intervals for stable aneurysms as follows:
 - Treated with endografts, annually
 - Treated with open surgical repair, every five years
- Stenosis or occlusion of the abdominal aorta or branch vessels, not otherwise specified:
 - Added surveillance indication and interval for surgical bypass grafts

Advanced imaging of the chest updates by section

- Tumor or neoplasm:
 - Allowed follow-up of nodules less than 6 mm in size seen on incomplete thoracic CT scan, in alignment with follow-up recommendations for nodules of the same size seen on complete thoracic CT scan
 - Added new criteria for which follow-up is indicated for mediastinal and hilar lymphadenopathy
 - Separated mediastinal/hilar mass from lymphadenopathy, which now has its own entry
- Parenchymal lung disease —not otherwise specified:
 - Removed as it is covered elsewhere in the document (parenchymal disease in occupational lung diseases and pleural disease in other thoracic mass lesions)
- Interstitial lung disease, nonoccupational including idiopathic pulmonary fibrosis:
 - Defined criteria warranting advanced imaging for both diagnosis and management
- Occupational lung disease (adult only):
 - Moved parenchymal component of asbestosis into this indication
 - Added berylliosis
- Chest wall and diaphragmatic conditions:
 - Removed screening indication for implant rupture due to lack of evidence indicating that outcomes are improved
 - Limited evaluation of clinically suspected rupture to patients with silicone implants

Oncologic imaging updates by section

- MRI breast:
 - New indication for breast implant associated anaplastic large cell lymphoma
 - New indication for pathologic nipple discharge
 - Further define the population of patients most likely to benefit from preoperative MRI

* AIM Specialty Health is an independent company providing some utilization review services on behalf of Healthy Blue. Availity, LLC is an independent company providing administrative support services on behalf of Healthy Blue.

- Breast cancer screening:
 - Added new high-risk genetic mutations appropriate for annual breast MRI screening
- Lung cancer screening:
 - Added asbestos-related lung disease as a risk factor

As a reminder, ordering and servicing providers may submit prior authorization requests to AIM in one of several ways:

- Access AIM's *ProviderPortal*SM directly at <https://providerportal.com>. Online access is available 24/7 to process orders in real time, and is the fastest and most convenient way to request authorization.
- Access AIM via the Availity Portal* at <https://www.availity.com>.
- Call the AIM Contact Center toll-free number at **1-800-714-0040** from 7 a.m. to 7 p.m.

If you have questions related to guidelines, please contact AIM via email at aim.guidelines@aimspecialtyhealth.com. Additionally, you can access and download a copy of the current and upcoming guidelines [here](#).