

| | |
|--|---|
| CMS Manual System | Department of Health & Human Services (DHHS) |
| Pub 100-04 Medicare Claims Processing | Centers for Medicare & Medicaid Services (CMS) |
| Transmittal 1301 | Date: JULY 20, 2007 |
| | Change Request 5665 |

SUBJECT: Revised Information on PET Scan Coding

I. SUMMARY OF CHANGES: This Change Request updates the manual by removing CPT code 78609 from the list of covered codes effective January 28, 2005, and removes HCPCS code A4641 from the list of applicable tracer codes for PET scans effective January 1, 2008.

NEW/REVISED MATERIAL:

EFFECTIVE DATE: January 28, 2005, for CPT code 78609 non-coverage

EFFECTIVE DATE: January 1, 2008, for HCPCS code A4641 non-applicable for PET Scans

IMPLEMENTATION DATE: January 7, 2008

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED

| R/N/D | CHAPTER / SECTION / SUBSECTION / TITLE |
|--------------|---|
| R | 13/Table of Contents |
| R | 13/60.3.1/Appropriate CPT Codes Effective for PET Scans for Services Performed on or After January 28, 2005 |
| R | 13/60.3.2/Tracer Codes Required for PET Scans |
| N | 13/60.3.3/Medicare Summary Notice (MSN) |
| N | 13/60.3.4/Remittance Advice Message |

III. FUNDING:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2008 operating budgets.

IV. ATTACHMENTS:

**Business Requirements
Manual Instruction**

**Unless otherwise specified, the effective date is the date of service.*

Attachment - Business Requirements

| | | | |
|--------------------|--------------------------|----------------------------|-----------------------------|
| Pub. 100-04 | Transmittal: 1301 | Date: July 20, 2007 | Change Request: 5665 |
|--------------------|--------------------------|----------------------------|-----------------------------|

SUBJECT: Revised Information on PET Scan Coding

EFFECTIVE DATE: January 28, 2005, for CPT code 78609 non-coverage

EFFECTIVE DATE: January 1, 2008, for HCPCS code A4641 non-applicable for PET Scans

IMPLEMENTATION DATE: January 7, 2008

I. GENERAL INFORMATION

A. Background: All Positron Emission Tomography (PET) Scans services (codes 78459, 78491, 78492, 78608, and 78811-78816) require the use of a radiopharmaceutical diagnostic imaging agent (tracer). Therefore, the applicable tracer code should be used when billing for a PET scan service.

It has recently been brought to CMS' attention that the current Internet-Only-Manual Pub. 100-04, chapter 13, section 60.3.2, contains some erroneous information regarding HCPCS code A4641 and CPT code 78609. For Medicare purposes 78609 is a non-covered service. Section 60.3.1 incorrectly lists 78609 (PET for brain perfusion imaging) as a covered service by Medicare. In addition, A4641 (Radiopharmaceutical, diagnostic, not otherwise classified) is not an applicable tracer for PET Scans. This Change Request (CR) updates the manual by removing CPT code 78609 from the list of covered codes and HCPCS code A4641 from the list of applicable tracer codes for PET scans. These changes became effective on January 28, 2005 **for CPT code 78609 and will become effective January 1, 2008 for HCPCS code A4641.**

B. Policy: The purpose of this CR is to correct erroneous information that was originally issued in CR 3741, transmittal 527, dated April 15, 2005.

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

| Number | Requirement | Responsibility (place an "X" in each applicable column) | | | | | | | | | | | |
|--------|--|---|-----------------------|----------------------|-----------------------|------------------|------------------|---------------------------|-------------|-------------|--|-------|--|
| | | A / B M A C | D M M A C | F I I C | C A R E R | D M R C | R E H I | Shared-System Maintainers | | | | OTHER | |
| | | | | | | | F I S S | M C S | V M S | C W F | | | |
| 5665.1 | Contractors shall instruct providers not to report HCPCS code A4641 when submitting claims for PET Scans with dates of service on or after January 1, 2008. | X | | X | X | | | | | | | | |
| 5665.2 | Contractors shall update any edits to not allow HCPCS code A4641 on claims for PET Scans with dates of service on or after January 1, 2008. | X | | | X | | | X | | | | | |
| 5665.3 | Contractors shall instruct providers that effective January 28, 2005, CPT 78609 | X | | X | X | | | | | | | | |

| Number | Requirement | Responsibility (place an "X" in each applicable column) | | | | | | | | | | |
|----------|--|---|-------------|--------|---------------------------------|------------------|------------------|---------------------------|-------------|-------------|-------------|-------|
| | | A / B | D M E | F I | C A R R I E R | D M R C | R E H I | Shared-System Maintainers | | | | OTHER |
| | | | | | | | | F I S S | M C S | V M S | C W F | |
| | became a non-covered service for Medicare purposes. NOTE: CPT 78609 will have an 'N' indicator on the October MPFSDB update. | | | | | | | | | | | |
| 5665.4 | Contractors shall deny/reject claims submitted with CPT code 78609 with dates of service on or after January 28, 2005. | X | | X | X | | | X | | | | |
| 5665.4.1 | Contractors shall use Medicare Summary Notice (MSN) 16.10 "Medicare does not pay for this item or service." Spanish translation: "Medicare no paga por este artículo o servicio." | X | | | X | | | | | | | |
| 5665.4.2 | Contractors shall use Claim Adjustment Reason Code 96: "Non-covered charge." | X | | X | X | | | X | | | | |
| 5665.4.3 | Contractors shall use Remittance Advice Remark Codes N386:—"This decision was based on a National Coverage Determination (NCD). An NCD provides a coverage determination as to whether a particular item or service is covered. A copy of this policy is available at Http://www.cms.hhs.gov/mcd/search.asp If you do not have web access, you may contact the contractor to request a copy of the NCD." | X | | | X | | | | | | | |
| 5665.5 | Contractors shall update any edits to not allow CPT code 78609 on claims for PET Scans with dates of service on or after January 28, 2005. | X | | | X | | | X | | | | |
| 5665.6 | Contractors shall instruct providers when submitting claims for PET Scan containing CPT code 78459, 78608, or 78811-78816 to use only tracer code A9552 effective January 1, 2006. | X | | X | X | | | X | | | | |
| 5665.7 | Contractors shall instruct providers when submitting claims for PET Scan containing CPT code 78491 or 78492 to use only tracer code A9555 or A9526. | X | | X | X | | | | | | | |
| 5665.8 | Contractors shall not search for and adjust claims that have been paid prior to the | X | | X | X | | | | | | | |

| Number | Requirement | Responsibility (place an "X" in each applicable column) | | | | | | | | | | |
|--------|--|---|-------------|--------|--------------------------------------|----------------------------|-------------|---------------------------|-------------|-------------|-------------|-------|
| | | A / B | D M E | F I | C A R R I C E R | D M R R I C | R H I | Shared-System Maintainers | | | | OTHER |
| | | M A C | M A C | | | | | F I S S | M C S | V M S | C W F | |
| | implementation date. However contractors shall adjust claims brought to their attention. | | | | | | | | | | | |

III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility (place an "X" in each applicable column) | | | | | | | | | | |
|--------|--|---|-------------|--------|--------------------------------------|----------------------------|-------------|---------------------------|-------------|-------------|-------------|-------|
| | | A / B | D M E | F I | C A R R I C E R | D M R R I C | R H I | Shared-System Maintainers | | | | OTHER |
| | | M A C | M A C | | | | | F I S S | M C S | V M S | C W F | |
| 5665.9 | A provider education article related to this instruction will be available at http://www.cms.hhs.gov/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly. | X | | X | X | | | | | | | |

IV. SUPPORTING INFORMATION

A. For any recommendations and supporting information associated with listed requirements, use the box below: N/A

Use "Should" to denote a recommendation.

| X-Ref Requirement Number | Recommendations or other supporting information: |
|--------------------------|--|
| | |

B. For all other recommendations and supporting information, use the space below: N/A

V. CONTACTS

Pre-Implementation Contact(s): For FIs, Bill Ruiz at (410) 786-9283 or william.ruiz@cms.hhs.gov; for carriers, Yvette Cousar at (410) 786-2160 or yvette.cousar@cms.hhs.gov and, coverage, Stuart Caplan (410) 786-8564 or stuart.caplan@cms.hhs.gov.

Post-Implementation Contact(s): Appropriate regional office

VI. FUNDING

A. For TITLE XVIII Contractors, use only one of the following statements:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2008 operating budgets.

B. For Medicare Administrative Contractors (MAC), use only one of the following statements:

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). The contractor is not obligated to incur costs in excess of the amounts specified in your contract unless and until specifically authorized by the contracting officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the contracting officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

Medicare Claims Processing Manual

Chapter 13 - Radiology Services and Other Diagnostic Procedures

Table of Contents *(Rev.1301, 07-20-07)*

60.3.3 - Medicare Summary Notice (MSN)
60.3.4 - Remittance Advice Message

60.3.1 - Appropriate CPT Codes Effective for PET Scans for Services Performed on or After January 28, 2005

(Rev.1301, Issued: 07-20-07, Effective: 01-28-05 CPT Code 78609/01-01-08 HCPCS Code A4641, Implementation: 01-07-08)

NOTE: All PET scan services require the use of a radiopharmaceutical diagnostic imaging agent (tracer). The applicable tracer code should be billed when billing for a PET scan service. See section 60.3.2 below for applicable tracer codes.

| CPT Code | Description |
|----------|--|
| 78459 | Myocardial imaging, positron emission tomography (PET), metabolic evaluation |
| 78491 | Myocardial imaging, positron emission tomography (PET), perfusion, single study at rest or stress |
| 78492 | Myocardial imaging, positron emission tomography (PET), perfusion, multiple studies at rest and/or stress |
| 78608 | Brain imaging, positron emission tomography (PET); metabolic evaluation |
| 78811 | Tumor imaging, positron emission tomography (PET); limited area (<i>eg</i> , chest, head/neck) |
| 78812 | Tumor imaging, positron emission tomography (PET); skull base to <i>mid-thigh</i> |
| 78813 | Tumor imaging, positron emission tomography (PET); whole body |
| 78814 | Tumor imaging, positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization; limited area (<i>eg</i> , chest, head/neck) |
| 78815 | Tumor imaging, positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization; skull base to <i>mid-thigh</i> |
| 78816 | Tumor imaging, positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization; whole body |

60.3.2 - Tracer Codes Required for PET Scans

(Rev.1301, Issued: 07-20-07, Effective: 01-28-05 CPT Code 78609/01-01-08 HCPCS Code A4641, Implementation: 01-07-08)

The following tracer codes are applicable *only* to CPT 78491 and 78492. They can not be reported with any other code.

Institutional providers billing the fiscal intermediary

| HCPCS | Description |
|---|---|
| *A9555 | Rubidium <i>Rb-82</i> , Diagnostic, Per study dose, Up To 60 Millicuries |
| * Q3000 (Deleted effective 12/31/05) | Supply of Radiopharmaceutical Diagnostic Imaging Agent, Rubidium <i>Rb-82</i> , <i>per dose</i> |
| A9526 | Nitrogen N-13 Ammonia, Diagnostic, Per study dose, Up To 40 Millicuries |

NOTE: For claims with dates of service prior to 1/01/06, providers report Q3000 for supply of radiopharmaceutical diagnostic imaging agent, Rubidium *Rb-82*. For claims with dates of service 1/01/06 and later, providers report A9555 for radiopharmaceutical diagnostic imaging agent, Rubidium *Rb-82* in place of Q3000.

Physicians / practitioners billing the carrier:

| | |
|--------|--|
| *A4641 | Supply of Radiopharmaceutical Diagnostic Imaging Agent, Not Otherwise Classified |
| A9526 | Nitrogen N-13 Ammonia, Diagnostic, Per study dose, Up To 40 Millicuries |
| A9555 | Rubidium <i>Rb-82</i> , Diagnostic, Per study dose, Up To 60 Millicuries |

**NOTE: Effective January 1, 2008, tracer code A4641 is not applicable for PET Scans.*

The following tracer codes are applicable only to CPT 78459, 78608, 78811-78816.
They can not be reported with any other code:

Institutional providers billing the fiscal intermediary:

| | |
|---|---|
| * A9552 | Fluorodeoxyglucose F18, FDG, Diagnostic, Per study dose, Up to 45 Millicuries |
| * C1775 (Deleted effective 12/31/05) | Supply of Radiopharmaceutical Diagnostic Imaging Agent, Fluorodeoxyglucose F18, <i>(2-Deoxy-2-18F Fluoro-D-Glucose), Per dose (4-40 Mci/ML)</i> |
| **A4641 | Supply of Radiopharmaceutical Diagnostic Imaging Agent, Not Otherwise Classified |

* **NOTE:** For claims with dates of service prior to 1/01/06, OPPS hospitals report C1775 for supply of radiopharmaceutical diagnostic imaging agent, Fluorodeoxyglucose *F18*. For claims with dates of service 1/01/06 and later, providers report A9552 for

radiopharmaceutical diagnostic imaging agent, Fluorodeoxyglucose F18 in place of C1775.

**** NOTE:** *Effective January 1, 2008, tracer code A4641 is not applicable for PET Scans.*

Physicians / practitioners billing the carrier:

| | |
|--------|--|
| A9552 | Fluorodeoxyglucose F18, FDG, Diagnostic, Per study dose, Up to 45 Millicuries |
| *A4641 | Supply of Radiopharmaceutical Diagnostic Imaging Agent, Not Otherwise Classified |

***NOTE:** *Effective January 1, 2008, tracer code A4641 is not applicable for PET Scans.*

60.3.3 - Medicare Summary Notice (MSN)

(Rev.1301, Issued: 07-20-07, Effective: 01-28-05 CPT Code 78609/01-01-08 HCPCS Code A4641, Implementation: 01-07-08)

The following messages are used on the MSN.

If the claim is being denied for a noncovered procedure code such as 78609, the following message is used:

MSN 16.10

“Medicare does not pay for this item or service.”

The Spanish version of this MSN message should read:

“Medicare no paga por este artículo o servicio.”

60.3.4 - Remittance Advice Message

(Rev.1301, Issued: 07-20-07, Effective: 01-28-05 CPT Code 78609/01-01-08 HCPCS Code A4641, Implementation: 01-07-08)

If the denial is based on a national coverage determination such as 78609 (non covered procedure), use:

Remittance Advice Remark Codes N386: “This decision was based on a National Coverage Determination (NCD). An NCD provides a coverage determination as to whether a particular item or service is covered. A copy of this policy is available at <Http://www.cms.hhs.gov/mcd/search.asp>. If you do not have web access, you may contact the contractor to request a copy of the NCD.”