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ICD-9 CODING IN RELATION TO BILLING FOR POSITRON EMISSION TOMOGRAPHY (PET) IMAGING FOR ONCOLOGIC PURPOSES

This is coding document to assist in billing for PET imaging. Please refer to the entire coverage and claims processing documents on the CMS Website.

Medicare has established limited coverage for Pet Imaging **CPT/HCPCS codes:**

78608	PET imaging brain, metabolic evaluation
78811	PET imaging limited areas (e.g. chest, head/neck)
78812 skull base to mid thigh
78813 whole body
78814	PET with CT limited area (e.g. chest, head neck)
78815 skull base to mid thigh
78816 whole body

Tumor Type	Initial Treatment Strategy (formerly "diagnosis" & "staging")	Subsequent Treatment Strategy (formerly "restaging" & "monitoring response to treatment")
Colorectal	Cover	Cover
Esophagus	Cover	Cover
Head & Neck (not Thyroid, CNS)	Cover	Cover
Lymphoma	Cover	Cover
Non-Small Cell Lung	Cover	Cover
Ovary	Cover	Cover*
Brain	Cover*	CED
Cervix	Cover** or CED	Cover*
Small Cell Lung	Cover*	CED
Soft Tissue Sarcoma	Cover*	CED
Pancreas	Cover*	CED
Testes	Cover*	CED
Breast (female and male)	Cover**	Cover
Melanoma	Cover**	Cover
Prostate	Non-Cover*	CED
Thyroid	Cover	Cover** or CED
All Other Solid Tumors	Cover*	CED
Myeloma	Cover*	Cover*
All other cancers not listed herein	CED*	CED*

*Coverage Change

**Coverage w/Exceptions

Initial Treatment Strategy

The CMS will cover one FDG PET study for beneficiaries who have solid tumors that are biopsy proven or strongly suspected based on other diagnostic testing when the beneficiary's treating physician determines that the FDG PET study is needed to determine the location and/or extent of the tumor for the following therapeutic purposes related to the initial treatment strategy:

- To determine whether or not the beneficiary is an appropriate candidate for an invasive diagnostic or therapeutic procedure; or,
- To determine the optimal anatomic location for an invasive procedure; or,
- To determine the anatomic extent of tumor when the recommended anti-tumor treatment reasonably depends on the extent of the tumor.

Modifier: PI - Positron Emission Tomography (PET) or PET/Computed Tomography (CT) to inform the initial treatment strategy of tumors that are biopsy proven or strongly suspected of being cancerous based on other diagnostic testing.

Short descriptor: PET tumor init tx strat

NOTE: Claims for FDG PET imaging for oncologic indications for initial treatment strategy and containing modifier -PI are covered by Medicare only one time per cancer indication. Additional claims with modifier -PI for the same cancer indication will be denied as not reasonable and necessary

Based on CMS coverage criteria the contractor has developed ICD-9 codes that reflect the types of cancer listed in the NCD.

Initial Treatment

140.0 - 149.9	Malignant neoplasm of lip, oral cavity and pharynx
150.0 - 159.9	Malignant neoplasm of digestive organs and peritoneum
160.0 - 165.9	Malignant neoplasm of respiratory and intrathoracic organs
170.0 - 170.9	Malignant neoplasm of bone and articular cartilage
171.0 - 171.9	Malignant neoplasm of connective and other soft tissue
172.0 - 172.9	Malignant melanoma of the skin
173.0 - 173.9	Malignant neoplasm of the skin
174.0 - 175.9	Malignant neoplasm of the breast (male or female)
176.0 - 176.9	Karposi's sarcoma
179	Malignant neoplasm of uterus, part unspecified
180.0 - 180.9	Malignant neoplasm of cervix uteri
181	Malignant neoplasm of placenta
182.0 - 183.9	Malignant neoplasm of uterus, ovary and uterine adnexa
184.0 - 184.9	Malignant neoplasm of other and unspecified female genital organs
186.0 - 187.9	Malignant neoplasm of male genital organs (except prostate)
188.0 - 188.9	Malignant neoplasm of bladder
189.0 - 189.9	Malignant neoplasm of kidney and other unspecified urinary organs
190.1 - 190.9	Malignant neoplasm of eye
191.0 - 191.9	Malignant neoplasm of brain
192.0 - 192.9	Malignant neoplasm of other and unspecified parts of nervous system
193.0	Malignant neoplasm of thyroid gland
194.0 - 194.9	Malignant neoplasm of other endocrine glands and related structure
195.0 - 195.8	Malignant neoplasm of other and ill defined sites
196.0 - 198.89	Secondary neoplasms

199.0 - 199.2	Malignant neoplasm without mention of site
200.00 - 202.98	Lymphosarcoma and reticulosarcoma and other specified malignant tumors of lymphatic tissue
203.00 – 203.02	Multiple Myeloma
209.0 - 209.3	Neuroendocrine tumors
235.0 - 235.9	Neoplasms of uncertain behavior and of unspecified nature
*518.89	Other diseases of lung, not classified elsewhere
*793.1	Non-specific abnormal findings on radiological and other examinations of body structure – Lung field

Claims Submission

Effective for claims with dates of service on or after April 3, 2009, received on or after October 30, 2009, contractors shall accept claims with...

1. Modifier -PI AND
2. One of the PET/PET/CT CPT codes in CR 6632 AND
3. An ICD-9 cancer diagnosis code billed for the initial treatment strategy for solid tumors.

Subsequent Treatment Strategy

The CMS will non-cover FDG PET imaging for subsequent anti-tumor treatment strategy for tumor types other than breast, colorectal, esophagus, head and neck (non-CNS/thyroid), lymphoma, melanoma, non-small cell lung, and thyroid, unless the FDG PET is provided under CED.

Modifier: PS - Positron Emission Tomography (PET) or PET/Computed Tomography (CT) to inform the subsequent treatment strategy of cancerous tumors when the beneficiary's treating physician determines that the PET study is needed to inform subsequent anti-tumor strategy.
Short descriptor: PET tumor subsq tx strategy

Subsequent Treatment Strategy covered without need for evidence development (CED): Subsequent treatment ICD-9 list

140.0-149.9	Malignant neoplasm of lip, oral cavity and pharynx
150.0-150.9	Malignant neoplasm of esophagus
153.0-153.9	Malignant neoplasm of colon
154.0-154.8	Malignant neoplasm of rectum, rectosigmoid junction, and anus
160.0 - 165.9	Malignant neoplasm of respiratory and intrathoracic organs
172.0 - 172.9	Malignant melanoma of the skin
174.0 - 175.9	Malignant neoplasm of the breast (male or female)
180.0 - 180.9	Malignant neoplasm of cervix uteri
183.0 - 183.9	Malignant neoplasm of ovary and other uterine adnexa
193.0	Malignant neoplasm of thyroid gland
200.00 - 202.98	Lymphosarcoma and reticulosarcoma and other specified tumors of lymphatic tissue
203.00 - 203.02	Multiple Myeloma
*V10.00-V10.44	Personal history of malignant neoplasm
*V10.47-V10.59	Personal history of malignant neoplasm
*V10.71-V10.79	Personal history of lymphatic or hematopoietic neoplasms
*V10.81-V10.89	Personal history of malignant neoplasm of other sights.

Claims Submission

Effective for claims with dates of service on or after April 3, 2009, received on or after October 30, 2009, contractors shall **accept** FDG PET claims for **subsequent treatment strategy** with the...

1. -PS modifier AND
2. One of the PET/PET/CT CPT codes listed in CR 6632 AND
3. An ICD-9 cancer diagnosis code

Subsequent Treatment Strategy Covered with Evidence Development (CED)

For tumor types other than breast, colorectal, esophagus, head and neck (non-CNS/thyroid), lymphoma, melanoma, non-small cell lung, and thyroid, CMS has determined that the available evidence is not adequate to determine that FDG PET imaging improves physician decision making in the determination of subsequent anti-tumor treatment strategy or improves health outcomes in Medicare beneficiaries and thus is not reasonable and necessary under §1862(a)(1)(A) of the Act.

However, CMS has determined that the available evidence is sufficient to determine that FDG PET imaging for subsequent anti-tumor treatment strategy for tumor types other than breast, colorectal, esophagus, head and neck (non-CNS/thyroid), lymphoma, melanoma, non-small cell lung, and thyroid may be covered as research under §1862(a)(1)(E) of the Act through CED. Therefore, CMS will cover a subsequent FDG PET study for tumor types other than breast, colorectal, esophagus, head and neck (non-CNS/thyroid), lymphoma, melanoma, non-small cell lung, and thyroid when the beneficiary's treating physician determines that the FDG PET study is needed to inform the subsequent anti-tumor treatment strategy and the beneficiary is enrolled in, and the FDG PET provider is participating in, the following type of prospective clinical study.

An FDG PET clinical study that is designed to collect additional information at the time of the scan to assist in patient management. Qualifying clinical studies must ensure that specific hypotheses are addressed; appropriate data elements are collected; hospitals and providers are qualified to provide the FDG PET scan and interpret the results; participating hospitals and providers accurately report data on all enrolled patients not included in other qualifying trials through adequate auditing mechanisms; and all patient confidentiality, privacy, and other Federal laws must be followed.

Subsequent Treatment Strategy Covered with Evidence Development (CED)

Brain, Small Cell Lung, Soft Tissue Sarcoma, Pancreas, Testes, Prostate, All other Solid tumors, All other cancers not listed herein.

Claims Submission

Effective for claims with dates of service on or after April 3, 2009, received after October 30, 2009, contractors shall **only accept** FDG PET claims billed to inform initial treatment strategy or subsequent treatment strategy when performed under CED with one of the

1. PET/PET/CT CPT codes in CR 6632 AND
2. Modifier -PI or -PS AND
3. An ICD-9 cancer diagnosis code, or an alternate diagnosis code, AND
4. Modifier -Q0: Investigational clinical service provided in a clinical research study that is in an approved clinical research study.

NOTE: For institutional claims, continue to include diagnosis code V70.7 and condition code 30 to denote a clinical trial.

Qualifying Clinical Study Program

CMS has approved the National Oncologic Pet Registry (NOPR) as meeting the criteria as a qualifying clinical study program. Providers must be listed as a participating site on the CMS Website and must meet all the NOPR participating requirements for each enrolled patient.

ICD-9 Coding in Relation to Billing for Positron Emission Tomography (PET) Imaging for Pet Scans code 78608 other than Oncologic

78608-PET brain imaging; metabolic evaluation

290.0, 290.10-290.13, 290.20-290.21, 290.3, 294.10-294.11, 331.0, 331.11, 331.19, 331.2, 345.01, 345.11, 345.2, 345.3, 345.41, 345.51, 345.61, 345.71, 345.8, 345.91, 780.93 These codes are covered in addition to the tumor codes listed elsewhere

Sources:

1. Pub 100-03 Medicare National Coverage Determinations
SUBJECT: FDG PET for Solid Tumors and Myeloma and Additional Manual Updates
2. Pub 100-04 Medicare Claims Processing
SUBJECT: FDG PET for Solid Tumors and Myeloma and Additional Manual Updates
3. CMS Claims Processing Manual

Revision History

*11/15/2009, added additional ICD-9 codes 518.89 and 793.1