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| NCD: | 220.6.17 | | |
| NCD Title: | Positron Emission Tomography (FDG) for Oncologic Conditions | | |
| IOM: | https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=331&ncdver=4&bc=AgAAQAAAAAAAAA%3d%3d& | | |
| MCD: | https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3162CP.pdf | | |
| | | ICD-10 CM | ICD-10 DX Description |
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| | | | NOTE: Refer to the following link for a list of appropriate diagnosis codes: |
| | | | http://www.cms.gov/Medicare/Coverage/DeterminationProcess/Downloads/PETforSolidTumorsOncologicDxCodesAttachment_NCD220_6_17.pdf |
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| | | | CMS reserves the right to add or remove codes associated with its NCDs in order to implement those NCDs in the most efficient manner within the confines of the policy. |

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| | | ICD-10 PCS | ICD-10 PCS Description |
| | | N/A | |

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|---|---|--|-------------------------|--------------|---------------------|-----------------|--------------------|-----------------------------|------------------------------|------------------------------|
| NCD Title: Positron Emission Tomography (FDG) for Oncologic Conditions | | (CR6632, CR7125, CR7148, CR8381, CR8468, CR8739, CR9751, CR9861, CR10086, CR10184, CR10318, CR10473, CR10622) | | | | | | | | |
| IOM: https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=331&ncdver=4&bc=AqAAQAAAAAAAAA%3d%3d& | | | | | | | | | | |
| MCD: https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3162CP.pdf | | | | | | | | | | |
| Part A | Rule Description Part A | Proposed HCPCS/CPT Part A | Frequency Limitations | TOB (Part A) | Revenue Code Part A | Modifier Part A | Provider Specialty | Proposed MSN Message Part A | Proposed CARC Message Part A | Proposed RARC Message Part A |
| Part A | | SCAN 78608=PET brain OR 78811=PET head/neck chest OR 78812=PET skull base to mid-thigh OR 78813=PET whole body OR 78814=PET/CT head/neck chest OR 78815=PET/CT skull base to mid-thigh OR 78816=PET/CT whole body AND | | | | | | | | |
| Part A | A/MACs: Effective for claims with DOS on or after 4/3/09, shall accept FDG PET claims billed to inform initial tx strategy with one of the following PET CPT codes AND modifier –PI: 78608, 78811, 78812, 78813, 78814, 78815, 78816 and FDG PET HCPCS radiopharmaceutical A9552. | RADIO A9552 | Once per initial tx -PI | N/A | N/A | PI | N/A | 23.17 | 50 | M64 |
| Part A | A/MACs: Effective for claims with DOS on or after 4/3/09, shall accept FDG PET claims with modifier –PS for the subsequent treatment strategy for solid tumors using one of the CPT codes AND a cancer diagnosis code AND FDG PET HCPCS radiopharmaceutical A9552. (See DX Tab/link) | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | 3 per -PS | N/A | N/A | PS | N/A | 23.17 | 50 | M64 |

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|--|--|---|------------------------------|------------|----------------------|----------|-----|-------|-----|-----|--|
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| NCD Title: Positron Emission Tomography (FDG) for Oncologic Conditions | | https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=331&ncdver=4&bc=AgAAQAAAAAAAAA%3d%3d& | | | | | | | | | |
| IOM: | | | | | | | | | | | |
| MCD: https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3162CP.pdf | | | | | | | | | | | |
| Part A | A/MACs: Effective for claims with DOS on or after 6/11/13, shall pay oncologic FDG PET claims for subsequent management, identified by one of the CPT codes 78608, 78811, 78812, 78813, 78814, 78815, or 78816, modifier –PS, FDG PET radio A9552, and the same cancer dx code (see attachment A on ICD Dx Tab), which exceed 3 FDG PET scans when the -KX modifier is included on the claim line. (The use of the -KX modifier attests that: 1) the requirements specified in the MACs' medical policy have been met, and, 2) the claim is for >3 FDG oncologic PET scans.) | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | Over 3 during PS without -KX | N/A | N/A | PS KX | N/A | 23.17 | 50 | M64 | |
| Part A | CWF shall create two edits for oncologic FDG PET claims to reject to contractors when a beneficiary has reached 4 or greater FDG PET scans for subsequent tx strategy (-PS) for the same cancer dx and the -KX modifier is not included on the claim line. -Edit 1 will set when an incoming FDG PET scan claim contains a unit field with more than 3, or the incoming claim FDG PET scan claim contains more than 3 FDG PET scans detail lines with the same dx. -Edit 2 will set when the FDG PET scans (-PS) on the incoming claim added to the FDG Pet scan services posted to the auxiliary file equal to more than 3 services for the same dx. | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | 4 per -PS Tx | N/A | N/A | PS KX | N/A | 23.17 | 50 | M64 | |
| Part A | CWF shall allow oncologic FDG PET scan claims to begin a new count with each subsequent tx strategy (-PS) and a different/new cancer dx than what is present in history for that beneficiary. NOTE: The presence or absence of an initial tx strategy (-PI) oncologic FDG PET claim in a beneficiary's record does not alter the count of the subsequent tx strategy (-PS) claims. When applying frequency limitations to each oncologic FDG PET claim for subsequent tx strategy (-PS), CWF shall allow both a claim for the professional service and a claim for a facility fee. CWF shall also count 1 PROF, 1 TECH for each global claim received. | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | 3 per -PS | N/A | N/A | PS | N/A | 23.17 | 50 | M64 | |
| Part A | CWF shall identify the following institutional claims as facility fee claims for oncologic FDG PET services: ●TOB 13X ●TOB 85X when the revenue code is not 096X, 097X or 098X | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | N/A | 13X 85X | 096X 097X 098X | N/A | N/A | N/A | N/A | N/A | |

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| NCD Title: | Positron Emission Tomography (FDG) for Oncologic Conditions | (CR6632, CR7125, CR7148, CR8381, CR8468, CR8739, CR9751, CR9861, CR10086, CR10184, CR10318, CR10473, CR10622) | | | | | | | | | |
| IOM: | https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=331&ncdver=4&bc=AqAAQAAAAAAAAA%3d%3d& | | | | | | | | | | |
| MCD: | https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3162CP.pdf | | | | | | | | | | |
| Part A | <p>A/MACs shall deny subsequent tx strategy (-PS) claims for oncologic FDG PET scans which exceed 3 when a -KX modifier is not included on the claim line using the following:</p> <p>-Edit 1 -will set when an incoming FDG PET scan claim (PS) contains a unit field with more than three (3), or the incoming claim FDG PET scan claim (PS) contains more than three (3) FDG PET scans (PS) detail lines with the same dx.</p> <p>-Edit 2 – will set when the FDG PET scans (PS) on the incoming claim added to the FDG Pet scan (PS) services posted to the auxiliary file equal more than three (PS) services for the same dx.</p> | <u>SCAN</u> | | | | | | | | | |
| | | 78608 78811 78812 78813 78814 78815 OR 78816 AND <u>RADIO</u> A9552 | Over 3 during PS without - KX | N/A | N/A | KX | N/A | 23.17 | 96 | N386 | |

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|-------------------|--|--|------------------------------|---------------------|------------|------------------------|---------------------------|------------------------------------|-------------------------------------|-------------------------------------|
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| IOM: | https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=331&ncdver=4&bc=AqAAQAAAAAAAAA%3d%3d& | | | | | | | | | |
| MCD: | https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3162CP.pdf | | | | | | | | | |
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| | | Proposed HCPCS/CPT Part B | Frequency Limitations | POS (Part B) | n/a | Modifier Part B | Provider Specialty | Proposed MSN Message Part B | Proposed CARC Message Part B | Proposed RARC Message Part B |
| Part B | Rule Description Part B | | | | | | | | | |
| | | SCAN 78608 78811 78812 78813 78814 78815 OR 78816 AND RADIO A9552 | | | | | | | | N56 or N386 |
| Part B | B/MACs: Effective for claims with DOS on or after 4/3/09, shall accept FDG PET claims billed to inform initial tx strategy with one of the following PET CPT codes AND modifier –PI: 78608, 78811, 78812, 78813, 78814, 78815, 78816 and FDG PET HCPCS radiopharmaceutical A9552. | | N/A | N/A | N/A | PI | N/A | 23.17 | 96 | |
| | | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | | | | | | | | |
| Part B | B/MACs: Effective for claims with DOS on or after 4/3/09, shall accept FDG PET claims with modifier –PS for subsequent tx strategy for solid tumors using one of the CPT codes, FDG PET radio A9552, AND a cancer dx code. | | 3 per -PS | N/A | N/A | PS | N/A | 23.17 | 96 | N386 |
| | | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | | | | | | | | |
| Part B | B/MACs Effective for claims with DOS on or after 6/11/13, shall pay oncologic FDG PET claims for subsequent management identified by one of the following CPT codes 78608, 78811, 78812, 78813, 78814, 78815, or 78816, modifier –PS, FDG PET radio A9552, and the same cancer dx code (See Attachment A on ICD Dx Tab), which exceed 3 FDG PET scans when the -KX modifier is included on the claim line. (The use of the -KX modifier attests that: 1) the requirements specified in the MACs' medical policy have been met, and, 2) the claim is for >3 FDG oncologic PET scans.). | | 3 per -PS | N/A | N/A | PS KX | N/A | 23.17 | 273 | N386 or N435 |
| | | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | | | | | | | | |
| Part B | CWF shall create two edits for oncologic FDG PET claims to reject to contractors when a beneficiary has reached 4 or greater FDG PET scans for subsequent tx strategy (-PS) for the same cancer dx and the -KX modifier is not included on the claim line. -Edit 1 will set when an incoming FDG PET scan claim (-PS) contains a unit field with more than 3, or the incoming claim FDG PET scan claim contains more than 3 FDG PET scan detail lines with the same dx. -Edit 2 will set when the FDG PET scans (-PS) on the incoming claim added to the FDG Pet scan services posted to the auxiliary file equal more than 3 -PS services for the same dx. | | 3 per -PS | N/A | N/A | PS KX | N/A | 23.17 | 273 | N386 N435 |
| | | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | | | | | | | | |

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| NCD: 220.6.17 | | (CR6632, CR7125, CR7148, CR8381, CR8468, CR8739, CR9751, CR9861, CR10086, CR10184, CR10318, CR10473, CR10622) | | | | | | | | | |
| NCD Title: Positron Emission Tomography (FDG) for Oncologic Conditions | | | | | | | | | | | |
| IOM: https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=331&ncdver=4&bc=AgAAQAAAAAAAAA%3d%3d& | | | | | | | | | | | |
| MCD: https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3162CP.pdf | | | | | | | | | | | |
| Part B | <p>CWF shall allow oncologic FDG PET scan claims to begin a new count with each subsequent tx strategy (-PS) and a different/new cancer dx than what is present in history for that beneficiary.</p> <p>NOTE: The presence or absence of an initial tx strategy (-PI) oncologic FDG PET claim in a beneficiary's record does not alter the count of the subsequent tx strategy (-PS) claims.</p> <p>When applying frequency limitations to each oncologic FDG PET claim for subsequent tx strategy (-PS), CWF shall allow both a claim for the professional service and a claim for a facility fee. CWF shall also count 1 PROF, 1 TECH for each global claim received.</p> | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | N/A | N/A | N/A | PS | N/A | 23.17 | 273 | N386 N435 | |
| Part B | <p>CWF shall identify all other oncologic FDG PET scan claims as professional service claims for screening services (professional claims and institutional claims with TOB 85X when the revenue code is 096X, 097X, or 098X).</p> | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | N/A | 85X | 096X 097X 098X | N/A | N/A | N/A | N/A | N/A | |
| Part B | <p>CWF shall identify the TECH (-TC) and PROF (-26) modifiers on claims for oncologic FDG PET services for physician claims. The absence of both the modifiers (TC and 26) qualifies the claim as global for physicians. HUBC claims received without both the -TC and -26 modifier will alert CWF that both components of the service have been received.</p> | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | N/A | N/A | N/A | TC 26 | N/A | 23.17 | 4 | N386 | |
| Part B | <p>B/MACs shall deny subsequent tx strategy (-PS) claims for oncologic FDG PET scans which exceed 3 when a -KX modifier is not included on the claim line using the following:</p> <p>-Edit 1 -will set when an incoming FDG PET scan claim (PS) contains a unit field with more than three (3), or the incoming claim FDG PET scan claim (PS) contains more than three (3) FDG PET scans (PS) detail lines with the same dx.</p> <p>-Edit 2 – will set when the FDG PET scans (PS) on the incoming claim added to the FDG Pet scan (PS) services posted to the auxiliary file equal more than three (PS) services for the same dx.</p> | 78608 78811 78812 78813 78814 78815 OR 78816 AND A9552 | Over 3 during PS without KX | N/A | N/A | KX | N/A | 23.17 | 273 | N386 or N435 | |
| Revision | | | | | | | | | | | |
| CR9751: Add additional radiopharmaceutical C9461 Choline C-11 to policy effective 4/1/16. | | | | | | | | | | | |
| CR9861: Add ICD-10 dx for neoplasms of uncertain behavior effective 10/1/16: D37.1, D37.2, D37.3, D37.4, D37.5, D37.6, D37.8, D37.01, D37.02, D37.04, D37.05, D37.09, D37.030, D37.031, D37.032, D38.0, D38.1, D38.2, D38.3, D38.4, D38.5, D39.0, D39.2, D39.8, D39.11, D39.12, D40.0, D40.8, D40.11, D40.12, D41.01, D41.02, D41.11, D41.12, D41.21, D41.22, D41.3, D41.4, D41.8, D42.0, D42.1, D43.0, D43.1, D43.3, D43.4, D43.8, D44.0, D44.2, D44.3, D44.4, D44.5, D44.6, D44.7, D44.11, D44.12, D48.0, D48.1, D48.2, D48.3, D48.4, D48.5, D48.61, D48.62, D48.7. | | | | | | | | | | | |

R2076_OTN2

Rule Description

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| NCD: 220.6.17 | (CR6632, CR7125, CR7148, CR8381, CR8468, CR8739, CR9751, CR9861, CR10086, CR10184, CR10318, CR10473, CR10622) |
| NCD Title: Positron Emission Tomography (FDG) for Oncologic Conditions | |
| IOM: https://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=331&ncdver=4&bc=AgAAQAAAAAAAAAA%3d%3d& | |
| MCD: https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3162CP.pdf | |
| <p>CR9861: Delete ICD-10 unspecified dx where laterality code is available effective 1/1/17: C00.2, C00.5, C03.9, C34.00, C34.10, C34.30, C34.80, C34.90, C40.00, C40.10, C40.20, C40.30, C40.80, C40.90, C43.20, C43.60, C43.70, C44.101, C44.111, C44.121, C44.191, C44.201, C44.211, C44.221, C44.291, C44.601, C44.611, C44.621, C44.691, C44.701, C44.711, C44.721, C44.791, C46.50, C47.10, C47.20, C49.10, C49.20, C50.019, C50.029, C50.119, C50.129, C50.219, C50.229, C50.319, C50.329, C50.419, C50.429, C50.519, C50.529, C50.619, C50.629, C50.819, C50.829, C50.919, C50.929, C56.9, C57.00, C57.10, C57.20, C62.00, C62.10, C62.90, C63.00, C63.10, C64.9, C65.9, C66.9, C69.00, C69.10, C69.20, C69.30, C69.40, C69.50, C69.60, C69.80, C69.90, C72.20, C72.30, C72.40, C74.00, C74.10, C74.90, C76.40, C76.50, C78.00, C79.00, C79.60, C79.70, D03.10, D03.20, D03.60, D03.70, C4A.10, C4A.20, C4A.60, C4A.70.</p> <p>Remove MCS per MCS request.</p> <p>Change RARC N345 to N386 in line 13, CARC N386 to 96 in line 17 per CORE.</p> <p>Effective 10/1/15, add ICD-10 dx D47.Z1</p> <p>Effective 1/1/17, MACs shall add 2 new PET radiopharmaceutical HCPCS codes to the existing logic and edits for this policy in accordance with the 1/1/17 Annual HCPCS Update:</p> <p>A9588: Fluciclovine f-18, diagnostic, 1 millicurie</p> <p>A9587: Gallium ga-68, dotatate, diagnostic, 0.1 millicurie</p> <p>Effective 1/1/17, MACs shall replace deleted PET radiopharmaceutical HCPCS C9461 Choline C-11 with HCPCS A9515 Choline C-11, diagnostic, per study dose up to 20 millicuries.</p> | |
| <p>CR10086: Specify A9515 and A9588 are only approved for suspected prostate cancer recurrence, therefore, they are restricted to ICD-10 dx C61 Malignant neoplasm of prostate, Z85.46, personal history of malignant neoplasm of prostate, and modifier -PS. CMS continues to nationally non-cover initial anti-tumor treatment strategy in Medicare beneficiaries who have adenocarcinoma of the prostate.</p> <p>ICD-9 codes removed from spreadsheet.</p> <p>ICD-10 dx depicting in situ cancer delete 10/1/15: D03.0, D03.4, D03.8, D03.9, D03.11, D03.12, D03.21, D03.22, D03.30, D03.39, D03.51, D03.52, D03.59, D03.61, D03.62, D03.71, D03.72.</p> | |
| <p>CR10184: No SSM edits at this time.</p> <p>10 dx C49.A1, C49.A2, C49.A3, C49.A4, C49.A5, C49.A9, R91.8 effective 10/1/16.</p> <p>C79.51, C79.52, C80.0, C80.1 effective 10/1/15.</p> <p>reference to and edits for A9515, A9587, A9588 that specifically link them to NCD220.6.17 since they are not 'FDG' related effective 10/1/17. These 3 new PET radiopharmaceuticals fall under the coverage parameters in CR8381.</p> <p>FISS to end-date effective 10/1/15 any non-NCD RCs, 32440 included, and replace with 59XXX NCD RCs.</p> <p>Add CARC 4 and RARC N386 to row 22</p> <p>Add "or" to rows 16,18 and 23 RARC Messages</p> | |
| <p>CR10318: End-date ICD-10 dx C96.2 effective 9/30/17.</p> <p>End-date ICD-10 dx R93.429 effective 9/30/15.</p> <p>Add ICD-10 dx R91.8, R92.8, R93.0, R93.2, R93.3, R93.4, R93.41, R93.49, R93.421, R93.422, R93.5, R94.02, Z85.01, Z85.038, Z85.048, Z85.118, Z85.12, Z85.21, Z85.22, Z85.3, Z85.43, Z85.79, Z85.810, Z85.818, Z85.820, Z85.828, Z85.830, Z85.850 effective October 1, 2017.</p> | |
| <p>CR10473: Delete ICD-10 dx codes C44.91, C44.92, C57.9 effective 10/1/15.</p> <p>20 from RARC N345 to N435.</p> | |
| <p>CR10622: End-date ICD-10 R93.4 effective 9/30/16.</p> <p>Add ICD-10 R93.41, R93.421, R93.422, and R93.49 effective 10/1/16 (corrected from 10/1/17 in CR10318).</p> <p>Add back CPT 78608 to column B inadvertently removed.</p> | |