

Part B Insider (Multispecialty) Coding Alert

CODING: Providers Celebrate PET Coding Move

CMS clears up deadline mystery

Providers are cheering the **Centers for Medicare and Medicaid Services'** decision to phase out dozens of HCPCS codes for positron emission tomography (PET) scans and replace them with just 11 CPT codes. These include new codes 78811-78816, as well as 78459, 78491-78492 and 78608-78609. (See PBI, Vol. 6, No. 9.)

The move is good news for a couple of reasons, says **Jeff Fulkerson**, senior certified coder in the radiology department at **Emory Health Care** in Stockbridge, GA. First of all, the CPT codes are based on the body area the physician scanned. "The CPT [codes] do a better job of identifying the work performed" and breaking it down by area, says Fulkerson. By contrast, the Level II HCPCS Codes were based on the effort the physician put in.

Also, any time you get away from G codes, that's a positive step, Fulkerson insists. Carriers consider G codes experimental and may not cover them at all in some cases. Once the procedure code is in CPT, "it's a little more mainstream," Fulkerson says.

LCD issue: Some questions remain, such as how the existing local coverage determinations that address the G codes will adapt to the CPT codes. Fulkerson expects the carriers to issue new policies that track their old policies as closely as possible.

Effective date: Providers were confused because CMS Transmittal 475, which announced the change, said the G codes would become invalid retroactive to Jan. 30, 2005. But the new codes won't take effect until April 4, 2005. Now, CMS has clarified that the G codes will remain in effect until April 4, but the change will indeed be retroactive to Jan. 30, according to a release from the **Society for Nuclear Medicine**.

Transmittal 475 addresses the payment for professional services for the CPT codes, but not the technical component. SNM expects CMS to issue a Medlearn Matters article soon providing more details on the code switch.