

Part B Insider (Multispecialty) Coding Alert

Coverage: Medicare Expands PET Scan Coverage

The Centers for Medicare & Medicaid Services continues to make it possible to bill for positron emission tomography (PET) scans for a wider variety of circumstances.

You can now bill for PET scans for noninvasive imaging of the perfusion of the heart to diagnose and manage patients with "known or suspected coronary artery disease," using radiopharmaceutical ammonia N-13.

The PET scan must be in place of, not in addition to, a single photon emission computed tomography (SPECT) scan, or following a SPECT scan that was inconclusive. In either case, the PET scan must be considered necessary to decide what medical or surgical intervention is needed to treat the patient.

Medicare now will cover PET scans for thyroid cancer. The scan must be for restaging of "recurrent or residual thyroid cancers of follicular cell origin" that have been previously treated with thyroidectomy and radioiodine ablation. These cancers must have a serum thyroglobulin of greater than 10 ng/ml, and a negative I-131 whole-body scan must have been performed.

But Medicare won't cover PET scans for soft-tissue sarcoma, after a thorough review of the scientific literature and a technology assessment. It also won't cover PET scans for dementia and neurodegenerative diseases.

Separately, CMS will decide about coverage for arthroscopic surgery for osteoarthritis of the knee by July 1, after taking a little extra time to consider a report submitted by the American Academy of Orthopedic Surgeons.

CMS received a technology assessment on June 18 from the Agency for Healthcare Research and Quality on the use of acupuncture for fibromyalgia, a widespread musculoskeletal pain and fatigue disorder whose cause remains unknown.

The AHRQ assessment said there's only one study on acupuncture that reviewers considered high enough quality to use. The study of 70 patients using electropuncture found "statistically significant benefits for acupuncture using several outcome measures such as pain relief." But the study only followed patients for three weeks, which isn't long enough to draw conclusions about long-term benefits.

So the AHRQ says there's not enough evidence to make conclusions about acupuncture yet. Two randomized clinical trials with 13-week follow-ups are under way and should provide more useful data.