

Medicare National Coverage Determination (NCD)

Topic: Medicare Coverage of positron emission tomography (PET) using radiopharmaceuticals for their Food and Drug Administration (FDA) approved labeled indications for oncologic imaging

Decision: Medicare removed the national non-coverage for FDA approved labeled oncologic uses of radiopharmaceuticals that are not more specifically determined nationally. This decision does not prevent CMS from determining national coverage for any uses of any radiopharmaceuticals in the future, and if such determinations are made, a future determination would supersede local contractor determination.

What this means: Effective for claims with dates of service on and after March 7, 2013, Pet coverage is expanded to include FDA approved labeled oncologic uses of radiopharmaceuticals that are not more specifically determined nationally. This decision does not change coverage for any use of PET using radiopharmaceuticals FDG (2-deoxy-2-[F-18] fluoro-D-Glucose (fluorodeoxyglucose)), NaF-18 (fluorine-18 labeled sodium fluoride), ammonia N-13, or rubidium-82 (Rb-82).

For more information, contact Customer Service at the number listed on your ID card.

This announcement can be found at:

<http://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=211>

Effective date: March 7, 2013