

CMS Manual System

Pub 100-04 Medicare Claims Processing

Transmittal 923

Department of Health &
Human Services (DHHS)

Centers for Medicare &
Medicaid Services (CMS)

Date: APRIL 28, 2006

Change Request 5054

**SUBJECT: Update of Radiopharmaceutical Imaging Agents HCPCS Codes
Applicable to PET Scan Services for Carriers**

I. SUMMARY OF CHANGES: This instruction updates Pub. 100-04 to include two new HCPCS codes for radiopharmaceutical diagnosis imaging agents (tracers).

NEW/REVISED MATERIAL

EFFECTIVE DATE: January 1, 2006

IMPLEMENTATION DATE: August 1, 2006

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS:

R = REVISED, N = NEW, D = DELETED

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
R	13/60.3.2/Tracer Codes Required for PET Scans

III. FUNDING:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.

IV. ATTACHMENTS:

Business Requirements

Manual Instruction

**Unless otherwise specified, the effective date is the date of service.*

Attachment - Business Requirements

Pub. 100-04	Transmittal: 923	Date: April 28, 2006	Change Request 5054
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SUBJECT: Update of Radiopharmaceutical Imaging Agents HCPCS Codes Applicable to PET Scan Services for Carriers

I. GENERAL INFORMATION

A. Background: This instruction updates Pub. 100-04, to include two new HCPCS codes for radiopharmaceutical diagnosis imaging agents (tracers). Effective 1/1/06, A9555 replaces Q3000 and A9552 replaces C1775. HCPCS codes Q3000 and C1775 are deleted effective 12/31/05. A prior Change Request 4270, Transmittal 822, released on February 1, 2006, did not update the manual for carriers. This instruction adds the two new codes to the manual for providers billing their local carriers.

B. Policy: No change in policy. This instruction simply updates current radiopharmaceutical diagnosis imaging agents applicable to PET scan services.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement
"Should" denotes an optional requirement

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
						F I S S	M C S	V M S	C W F	
5054.1	Contractors shall be in compliance with the manual instructions in chapter 13, section 60.3.2.			X						
5054.2	Contractors need not search their files to either retract payment for claims already paid or to retroactively pay claims. However, contractors shall adjust claims brought to their attention.			X						

III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)								
		F I	R H H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
						F I S S	M C S	V M S	C W F	
5054.3	A provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin and incorporated into any educational events on this topic. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.			X						

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: January 1, 2006 Implementation Date: August 1, 2006 Pre-Implementation Contact(s): April Billingsley (410) 786-0140 or april.billingsley@cms.hhs.gov Post-Implementation Contact(s): Regional offices	No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.
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60.3.2 - Tracer Codes Required for PET Scans

(Rev. 923, Issued: 04-28-06, Effective: 01-01-06, Implementation: 08-01-06)

Tracer codes applicable to CPT 78491 and 78492:

Institutional providers billing the fiscal intermediary

HCPCS	Description
*A9555	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Rubidium RB-82, Diagnostic, Per study dose, Up To 60 Millicuries
* Q3000 (Deleted effective 12/31/05)	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Rubidium RB-82
A9526	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Ammonia N-13

NOTE: For claims with dates of service prior to 1/01/06, providers report Q3000 for supply of radiopharmaceutical diagnostic imaging agent, Rubidium RB-82. For claims with dates of service 1/01/06 and later, providers report A9555 for radiopharmaceutical diagnostic imaging agent, Rubidium RB-82 in place of Q3000.

Physicians / practitioners billing the carrier:

A4641	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Not Otherwise Classified
A9526	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Ammonia N-13
<i>A9555</i>	<i>Supply of Radiopharmaceutical Diagnostic Imaging Agent, Rubidium RB-82, Diagnostic, Per study dose, Up To 60 Millicuries</i>

Tracer codes applicable to CPT 78459, 78608, 78609, 78811-78816:

Institutional providers billing the fiscal intermediary:

* A9552 (OPPS Only)	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Fluorodeoxyglucose F18, FDG, Diagnostic, Per study dose, Up to 45 Millicuries
* C1775 (Deleted effective 12/31/05)	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Fluorodeoxyglucose F18
A4641	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Not Otherwise Classified

* **NOTE:** For claims with dates of service prior to 1/01/06, *OPPS hospitals* report C1775 *and other providers report A4641* for supply of radiopharmaceutical diagnostic imaging agent, Fluorodeoxyglucose F1. For claims with dates of service 1/01/06 and later, providers report A9552 for radiopharmaceutical diagnostic imaging agent, Fluorodeoxyglucose F18 in place of C1775 *and A4641*.

Physicians / practitioners billing the carrier:

A4641	Supply of Radiopharmaceutical Diagnostic Imaging Agent, Not Otherwise Classified
<i>A9552</i>	<i>Supply of Radiopharmaceutical Diagnostic Imaging Agent, Fluorodeoxyglucose F18, FDG, Diagnostic, Per study dose, Up to 45 Millicuries</i>