



2005 Medicare PET Scan “G” Codes 2nd Quarter

The Centers for Medicare and Medicaid Services (CMS) released Transmittal 475 on February 11, 2005, documenting the procedure status change of “A” (*Active*) to “I” (*Inactive*) for Healthcare Common Procedural Coding System (HCPCS) codes G0030 - G0234, G0253 - G0254, G0254, G0296 and G0330 – G0336. (Please refer to your 2005 HCPCS manual for complete descriptions of these codes.) The replacement codes are Current Procedural Terminology (CPT[®]) codes 78459, 78491 – 78492, 78608 – 78609, and 78811 – 78816. (Please refer to your 2005 CPT[®] manual for complete descriptions of these codes.) The implementation date of this directive is April, 2005.

Medica will be implementing this directive for our Medicare Prime Solution products, group #s 70200 – 70299; 70500 – 70699. Submission of one of the HCPCS PET scan “G” codes after April 1, 2005, dates of service, will result in a provider liability denial. Claims may be resubmitted with the appropriate CPT[®] PET scan code for reprocessing.

Medica will continue to allow either the HCPCS PET scan “G” codes or the CPT[®] PET scan codes for our commercial and Medica Choice CareSM or Medica MinnesotaCare products.

The link to the CMS Program Transmittal is http://www.cms.hhs.gov/manuals/pm_trans/R475CP.pdf.

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