

PET IMAGING

PET/CT VALUE CONFIRMED — COVERAGE EXPANDED

PET/CT leads to a change in management in 36.5% of patients. This statistic serves as the foundation for CMS' announcement, effective April 6, 2009, that reimbursement is now available for PET/CT scans in many of the previously non-covered indications. The new reimbursement system consists of two categories: *initial treatment strategy* (formerly diagnosis and staging) and *subsequent treatment strategy* (previously treatment monitoring and restaging). **CMS has agreed to cover PET/CT in the initial treatment strategy for all solid tumors with the exception of prostate cancer. The new program has also opened access to PET/CT in both the initial and subsequent treatment strategy phases for patients with ovarian cancer, cervical cancer and multiple myeloma.** For any cancer that is not yet covered during the subsequent treatment strategy, a new CED (coverage with evidence development) program, also called NOPR II or NOPR 2009, will provide PET/CT continued access to patients while helping accumulate additional data to support the clinical value of this oncologic imaging tool. For questions regarding these expanded guidelines, please contact PET Imaging.

PET/CT COVERAGE: FINAL FRAMEWORK

Solid Tumor Type	Initial Treatment Strategy	Subsequent Treatment Strategy
Colorectal	Cover	Cover
Esophagus	Cover	Cover
Head & Neck (not thyroid or CNS)	Cover	Cover
Lymphoma	Cover	Cover
Non-small cell lung	Cover	Cover
Ovary	Cover	Cover
Brain	Cover	CED
Cervix	1 or CED	Cover
Small cell lung	Cover	CED
Soft Tissue Sarcoma	Cover	CED
Pancreas	Cover	CED
Testes	Cover	CED
Breast (female and male)	2	Cover
Melanoma	3	Cover
Prostate	N/C	CED
Thyroid	Cover	4 or CED
All other solid tumors	Cover	CED
Myeloma	Cover	Cover
All other cancers not listed herein	CED	CED

* 1,2,3,4: Please contact PET Imaging for further details.