Proposed CMS Decision Memo for PET

In a major win for the imaging industry, the Centers for Medicare and Medicaid Services (CMS)stepped back from its broad policy of not covering new positron emission tomography (PET) by proposing to let local Medicare Administrative Contractors (MACs) decide whether to cover PET that uses radiopharmaceuticals for cancer imaging. However, it's not yet clear what the 15 MACs would do.

CMS emphasized that it is not proposing to cover PET tracers. "Changing the 'restrictive' language of prior PET decisions will not by itself suffice to expand Medicare coverage to new PET radiopharmaceuticals," according to the tracking sheet. The decision only would apply to drugs approved by FDA for oncologic PET tracers. The new policy would not include screening uses of PET scanning.

The effect of this decision, if finalized without change, would be to remove the national noncoverage for any of these identified uses of these radiopharmaceuticals that have not been more specifically determined nationally. Thus this change would not apply to 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 Rb-82. This would not prevent CMS from determining national coverage for any of these uses in the future, and if such determinations are made, a future determination would supersede local contractor determinations.

In addition, the new policy does not deal with PET for neurologic conditions, such as Alzheimer's. CMS is considering a separate request, by Eli Lilly, for using PET for neurologic applications. On January 30th, CMS' Medicare Evidence Development and Coverage Advisory Committee will discuss beta amyloid PET imaging for the management of dementia and neurodegenerative disease, such as Alzheimer's. A decision on that request is expected mid-summer.

CMS is accepting public comments on this proposal through January 12, 2013. After consideration of public comments and any additional evidence, CMS will issue a final determination by mid-April.