

**FIRST COAST SERVICE OPTIONS
FLORIDA MEDICARE PART B
LOCAL COVERAGE DETERMINATION**

CPT/HCPCS Codes

71250 Computed tomography, thorax; without contrast material

71260 with contrast material(s)

71270 without contrast material, followed by contrast material(s) and further sections

Indications and Limitations of Coverage and/or Medical Necessity

A computed tomographic (CT) image is a display of the anatomy of a thin slice of the body developed from multiple x-ray absorption measurements made around the body's periphery. Unlike conventional tomography, where the image of a thin section is created by blurring out the information from unwanted regions, the CT image is constructed mathematically using data arising only from the section of interest. Generating such an image is confined to cross sections of the anatomy that are oriented essentially perpendicular to the axial dimensions of the body. Reconstruction of the final image can be accomplished in any plane. The CT of the thorax extends from the lung apices to the posterior costophrenic sulci and may extend inferiorly to image the adrenal glands.

Florida Medicare will consider a CT of the thorax medically reasonable and necessary under the following circumstances:

- Evaluation of abnormalities of the lungs, mediastinum, pleura and chest wall initially found on a standard chest radiograph or barium swallow.
- Evaluation, staging, and follow-up after therapy (e.g., surgery, radiation, and/or chemotherapy) of lung and other primary thoracic malignancies.
- Evaluation of a patient with extrathoracic malignancies/tumors/masses in which the lungs are suspected as being the primary site.
- Evaluation of a patient who sustained trauma to the pleura, chest wall, mediastinum, and lung.
- Localization of a thoracic mass prior to biopsy.
- Evaluation of a patient with suspected congenital or acquired abnormalities.
- Evaluation of a patient with myasthenia gravis to rule out thymic tumors.
- Performance of CT-guided biopsies and drainage procedures when fluoroscopy is inadequate.
- Evaluation of a patient presenting with signs and/or symptoms suggestive of an aortic dissection. The most common symptom of an aortic dissection (occurring in approximately 90% of the cases) is sudden, excruciating pain most commonly located in the anterior chest. Patients may describe the pain as "cutting," "ripping," or "tearing". A sudden neurologic episode usually accompanies the onset of most instances of "painless" aortic dissection.

- Evaluation of a patient with any other condition/symptom when there is support in medical and scientific literature for the effective use of the scan for the condition being evaluated and the scan is reasonable and necessary for the individual patient.

NOTE: Posterior and lateral views of the chest represent the basic screening tool in identifying abnormalities involving the thorax. It is expected that the chest x-ray is used to evaluate patients who present with signs and/or symptoms suggestive of chest pathology prior to proceeding to a CT scan. However, in limited circumstances, a CT of the Thorax may be used as a primary diagnostic tool if the documentation supports that the initial test was reasonable and necessary and the medical literature supports the CT scan as the primary diagnostic test for the condition being evaluated.

In addition to the medical necessity requirements, the CT scan must be performed on a model of CT equipment that meets the following criteria:

- The model must be known to the Food and Drug Administration; and
- Must be in the full market release phase of development.