Medical Policy:
Positron Emission Tomography (PET) Scans

<table>
<thead>
<tr>
<th>Policy Number:</th>
<th>Title: Positron Emission Tomography (PET) Scans</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department: Medical</td>
<td>Unit:</td>
</tr>
<tr>
<td>Effective Date: 01/01/2014</td>
<td>Revision Date:</td>
</tr>
</tbody>
</table>

PURPOSE
To establish criteria for coverage of positron emission tomography (PET) scans.

POLICY

PET scans are indicated for preoperative evaluation of the brain in patients who have intractable seizures and are candidates for focal surgery.

PET Scans are covered for diagnosis of the following cancers:
1) Solitary pulmonary nodules and non-small cell lung cancer
2) Evaluation of cervical lymph node metastases when CT or MRI does not demonstrate an obvious primary tumor.

For diagnosis, PET is covered only when it will avoid an invasive diagnostic procedure, or when it will assist in determining the optimal anatomic location to perform an invasive diagnostic procedure.

PET scans are covered for the initial staging of the following cancers:
1) Cervical cancer only when initial MRI or CT is negative for extra-pelvic metastasis
2) Head and neck cancer when initial MRI or CT is equivocal
3) Colon cancer
4) Esophageal cancer
5) Solitary pulmonary nodule
6) Non-small cell lung cancer
7) Lymphoma
8) Melanoma

For staging, PET is covered when clinical management of the patient will differ depending on the stage of the cancer identified and either:
1) The stage of the cancer remains in doubt after standard diagnostic work up, OR
2) PET replaces one or more conventional imaging studies when they are insufficient for clinical management of the patient.

Restaging is covered only for cancers for which staging is covered and for thyroid cancer if recurrence is suspected and I131 scintography is negative. For restaging, PET is covered after completion of treatment for the purpose of detecting residual disease, for detecting suspected recurrence or determining the extent of a known recurrence. PET is not covered to monitor tumor response during the planned course of therapy.

PET scans are NOT indicated for routine follow up of cancer treatment or routine surveillance in asymptomatic patients.

PET scans are NOT indicated for cardiac evaluation.