

Medicare has set 2017 billing codes and payment levels for low-dose CT lung cancer screening and counseling.

A G code is a temporary CPT code issued by CMS when a permanent national code does not exist. It is used to meet program needs such as:

- Implementing coverage decisions or legislative mandates
- Identifying procedures in a hospital outpatient setting when no CPT code exists
- Identifying medical devices used in a hospital outpatient setting



Codes	2017 Payment Rates National Averages	
	Physician Fee Schedule	Hospital Outpatient Department Payment
LDCT Scan G 0297 LDCT scan for lung cancer screening	TC \$204.57 PC \$51.68	\$59.86 (APC 5521)
Shared Decision Making Counseling G 0296 Counseling visit to discuss need for lung cancer screening using LDCT. (Service is for eligibility determination and shared decision making)	\$28.71	\$70.26 (APC 5822)

Claims may be submitted from the date of the original CMS coverage decision (2/5/15)