

Medicare 2018 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	2018 Payment Rates National Averages	
CPT/HCPCS	Physician Fee Schedule	Hospital Outpatient Department Payment
LDCT Scan G 0297 LDCT scan for lung cancer screening	TC \$189.71 PC \$52.56	\$62.11 (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)	\$29.16	\$71.94 (APC 5822)

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