



# Pre-operative Imaging Guidance

*Q: Is the pre-operative CT scan that is necessary for the development of the 3D computer model for the Match Point technology (i.e., “patient-specific templates”) covered by insurance?\**

## Match Point System™

Aim, Set, Matched™

### MEDICARE

Medicare covers CT scans that are “reasonable and necessary” if medical and scientific literature and opinion support the use of a scan for the patient’s condition.

There is no specific National Coverage Determination (“NCD”) on the use of a CT scan for patient-specific templates. Therefore, coverage decisions are left to the discretion of local Medicare carriers.

### PRIVATE PAYOR

- A few large, private payers publish their coverage policies on line (e.g., Aetna, CIGNA, Humana, etc.).
- Aetna does cover MRIs used for patient-specific custom cutting jigs used for total knee arthroplasty.
- Accordingly, providers should contact their payers directly for coverage information on CT scans for patient-specific templates.

### AMERICAN COLLEGE of RADIOLOGY

The ACR believes that it is appropriate to bill only for the technical component when a CT scan is taken for the design of patient-specific templates; there should be no charge generated for a professional component.

### CODING

The American Medical Association (“AMA”) has established several CPT codes that describe CT imaging. The codes are listed below.

- |         |   |
|---------|---|
| • 73200 | Computed tomography, upper extremity; without contrast material |
| • 73700 | Computed tomography, lower extremity; without contrast material |
| • 73701 | Computed tomography, lower extremity; with contrast material    |

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