PAYMENT POLICIES

Computer-Aided Detection (CAD) for Mammography

Scope

This policy applies to:

☐ Kaiser Permanente Health Plan of Washington
☐ Kaiser Permanente Health Plan of Washington Options, Inc.

☑ Commercial □ Medicare □ Medicaid

Policy

Kaiser Permanente will not separately reimburse CAD for mammography services for all commercial members for dates of service prior to 2017. Kaiser Permanente will reimburse CAD in 2017, as it is included in the mammography service CPT description.

Billing/Coding Guidelines

All claims must be billed according to Centers for Medicare & Medicaid Services (CMS) guidelines.

Policy Definitions

Computer-aided detection
Is the procedure in medicine that assists in the interpretation of medical images.

Prerequisite(s)

N/A

References

“Diagnostic Accuracy of Digital Screening Mammography With and Without Computer-Aided Detection,” JAMA Internal Medicine September 2015

“Is It Time to Stop Paying for Computer-Aided Mammography?,” JAMA Internal Medicine September 2015

Frequently Asked Questions

Q1: Why is CAD for mammography not separately reimbursable?
A1: CAD does not add any clinically significant benefits. CAD use is not associated with improvements in sensitivity, specificity, positive predictive value, cancer detection rates, or other proximal screening outcomes. Many radiologists have learned that the use of CAD means having to review thousands of “false positive” marks on normal mammograms for an insignificant benefit in cancer detection.

Q2: Is CAD for mammography reimbursable for a Medicare member?
A2: Yes. CAD is currently a covered benefit under CMS guidelines.

Q3: Is CAD for mammography separately reimbursable for a commercial member?
A3: No. CAD can result in false positive results and can lead to unnecessary treatment for women.

Note: This information is intended to serve only as a general reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee’s benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.