Medical Coverage Policies

Photodynamic Therapy for Treatment of Actinic Keratoses

Description:

Actinic keratoses (AKS) are rough, scaly, or warty premalignant growths on sun-exposed skin that are very common in older individuals. The condition generally occurs in more than 80% of fair-skinned people over the age of 60. These lesions may progress over time to become invasive squamous cell carcinoma.

Photodynamic Therapy (PDT) is a non-invasive treatment for AKS, consisting of a topical solution of 20% aminolevuline acid HCl with a photoactivating light. Treatment is a two-stage process for targeted destruction of non-hyperkeratotic AKS of the face and scalp. The treatment is a drug-device combination involving the topical application of the aminolevulinic acid (called Levulan Kerastick) directly to lesions, followed by BLU-U Photodynamic therapy (PDT) 14 to 18 hours later. Exposure to the blue light generates a photodynamic reaction with the topical agent. The reaction is a cytotoxic process, preventing further reproduction and growth of the keratotic cells while destroying the existing cells of the lesion.

If light treatment is postponed on a patient who has received the solution application, the lesions become photosensitive and the patient must avoid exposure to skin and eyes, as well as avoid direct sunlight or bright indoor light for approximately 40 hours.

Photodynamic therapy is generally used as a treatment for non-hyperkeratotic AKS on the face and scalp versus other treatment techniques for its improved cosmesis.

Medical Criteria:

Not applicable, this is a reimbursement policy.

Policy:

PDT is covered for non-hyperkeratotic actinic keratoses of the face and scalp.

Coverage:

Benefits may vary between groups/contracts. Please refer to the appropriate member certificate/subscriber agreement/RItte Care contract for applicable medical services coverage/benefits.

Coding and Reimbursement:

96567

DO NOT report CPT codes 17000, 17003, or 17004 for this procedure.

HCPCS Code:

JT308 Aminolevulinic acid HCl for topical administration, 20%, single unit dosage form (354 mg)

Photodynamic therapy may involve two office visits, one for the application of the topical ALA, and a second visit to expose the patient to blue light.

Code 96567 is considered a procedure, therefore no office visit copayment would apply.
Also Known As:

Photodynamic therapy for dermatology conditions
LevulanPDT
Levulan Kerastick
Aminolevulinic acid HCI

Related Topics:

Not applicable

Published:

Policy Update, September 2002
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Provider Update, July 2008

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