

Notice Date:
To:
From:
Subject:

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| CG-070-3 Tumor Imaging PET – Breast Cancer – Initial Diagnosis | Georgia Medicaid | 01/01/2024 |
| CG-070-4 Tumor Imaging PET – Melanoma – Noncovered Indications | Georgia Medicaid | 01/01/2024 |
| CG-071 Brain PET Scan | Georgia Medicaid | 01/01/2024 |
| CG-072 Heart PET Scan | Georgia Medicaid | 01/01/2024 |
| CG-079 Heart PET with CT for Attenuation | Georgia Medicaid | 01/01/2024 |
| CG-110 Fetal MRI | Georgia Medicaid | 01/01/2024 |

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DCH Approved: 10/17/2023