

Molecular Pathology Workgroup General Session

June 2, 2011

Facilitator(s):

Claudia Bonnell, BCBS, CPT Editorial Panel

Andrea H. McGuire, MD, CPT Editorial Panel

Mark Synovec, MD, CPT Editorial Panel





Agenda



- 1. Introductions**
- 2. Confidentiality agreements**
- 3. Updates:**
 - a. Panel actions of February 2011
 - b. Panel agenda June 2011
 - i. Tier 1 Subworkgroup (CPT proposal #3695)
 - ii. Tier 2a Subworkgroup (CPT proposal #3696)
- 4. Current work of Subworkgroups**
 - a. Review of Public Comments
 - b. Tier 1 Subworkgroup
 - c. Tier 2a Subworkgroup
- 5. Discussion issues for Workgroup:**
 - a. IVDMIA/MMA
 - b. Retirement of stacking codes.
- 6. Questions**
- 7. Summary/meeting wrap up.**





3a. Panel Actions February

- Tier 1

- Added nine new definitions to the MoPath introduction
- Added 67 new analyte codes including:
 - HLA molecular testing section (14 codes) that includes a new introduction
 - Chimerism testing
 - Cytogenomic constitutional microarrays

- Tier 2

- Created the Tier 2 section with a series of 9 codes (levels) to account for different technical cost and work
- Created a new introduction for this section
- 79 individual analytes included into the 9 code levels (ranging from one to 19 per code)





3a. Panel Actions February

- Editorial Panel Executive Committee/Editorial Panel approved the creation of the Molecular Pathology Advisory Panel (MPAP).
- They also agreed that membership on the Molecular Pathology Advisory Panel would be subject to the workgroup co-chair process as defined in the Workgroup Process document.
- The Operating procedures of the MPAP will be drafted by AMA staff.





MPAP Charge

To review all molecular pathology code proposals and existing codes, and make recommendations to the Pathology Coding Caucus (PCC) and the CPT Editorial Panel regarding the placement of the potential code or possible needed changes in the existing molecular pathology coding. The Advisory Panel will provide their recommendations to the PCC, and ultimately the CPT Editorial Panel, to assist with final decisions regarding the molecular pathology code proposals or code maintenance.





MPAP Composition (9 members)



Slotted Seats:

- CPT Panel Member (Chair)
- Pathology Coding Caucus Chair
- Pathology RUC Advisor



Six Rotating Seats:

- Eventually staggered 3-year terms
- Technical expertise from commercial labs, industry, academia, and private practice
- One must be a payor representative
- Will be responsible to the CPT Editorial Panel and would not be representing their employer or specific area of pathology





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Tier 1 Subworkgroup (CPT proposal #3695)

Ten additional analyte-specific codes have been added to Tier 1 for the following analytes:



- EGFR
- GJB2
- GJB6
- PTEN
- PMP22



Tier 2 Subworkgroup (CPT proposal #3695)



17 additional analytes have been added to five of the Tier 2 level codes, including codes for:



- **Human Platelet Antigen genotyping**
- **Cytogenomic microarray analysis, neoplasia**
- **And others**





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Public Comments

- Unprecedented request by *AMA-CPT* for public comments after Editorial Panel acceptance of a code set, but before it was published.
- Comment period ended April 15, 2011
- Provided public:
 - Review of the MPWG's work
 - Review of the actual code sets (to date) including introductory language
 - Provided a specific mechanism to address concerns with:
 - Specific wording of introduction or code descriptor
 - Specific analyte not currently identified in the code lists
 - Multi-analyte molecular pathology assay (MMA) not currently identified in the code list (eg, In Vitro Diagnostic Multivariate Index Assays).



Public Comments

How to respond:

- Specific wording of any particular code descriptor.
 - Analyte/Code Revision Form
- Specific analyte not currently identified in the code list.
 - Analyte/Code Revision Form
- Multi-analyte molecular pathology assay (MMA) not currently identified in the code list (eg, In Vitro Diagnostic Multivariate Index Assays).
 - Molecular Pathology Code Change Application





Public Comments



- 30 commentors provided input that was divided accordingly:
 - Proposed new Tier 1 code(s) (2/0)
 - Proposed modifications of Tier 1 code(s) (18/6)
 - Proposed modifications of the definitions (5/2)
 - Proposed new Tier 2 code analyte(s) (340/??)
 - Proposed modifications of Tier 2 code analyte(s) (4/1)
 - Proposed modifications of the Tier 2 introduction (2/0)
 - Payment policy comments (n/a)
 - No proposals for MMAs were received!
- Modifications to CPT verbiage forwarded to CPT-EC for deliberation
- Some comments suggested a lack of understanding of the code/coding system and are being referred to *CPT Assistant* for public education.

*Numbers are estimates



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Tier 1 Subworkgroup Work Report



1. Prepared proposal #3695 that will be discussed tomorrow at the Editorial Panel
2. Reviewed and made recommendations on germane Public Comments
3. Provided fundamental comments to Correct Coding Solutions for MUE/NCCI development
4. Had extensive discussions regarding MMAs:
 - a. On the table for discussion
 - A conceptual framework for CPT to include these analyses into the coding set
 - The appropriate level of granularity for such a code set
 - Template for the basic descriptor language for individual CPT codes.
 - b. NOT on the table for discussion
 - Individual manufacturer's analyses for consideration of a specific CPT code!





Tier 1 Subworkgroup MMA conclusions (what the Co-chairs heard!)

1. The analyses being performed are very manufacturer specific and this area is not conducive for code lumping (ie, need high granularity)
2. No specific descriptor language template could be readily identified and hence referring to the nomenclature used in peer-reviewed literature will be a good place to start for individual descriptor development.



Tier 1 Subworkgroup MMA conclusions (what the Co-chairs heard!)

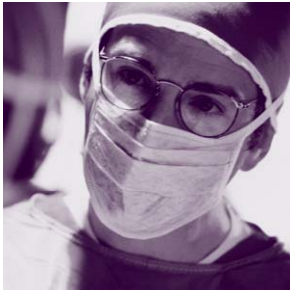


3. There is no truly “fair” way for a (sub)workgroup to deliberate what analyses are appropriate for Category I code placement. It should be up to the manufacturer to prove appropriateness through the more typical CPT code change proposal process.
4. MMAs do not include the entire gambit of IVDMIAAs and hence the issue should not be considered a solely a sub-issue of the MPWG.



Tier 1 Subworkgroup Work Report

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4. Had extensive discussions regarding MMA's:
 - a. On the table for discussion
 - A conceptual framework for CPT to include these analyses into the coding set
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 - b. NOT on the table for discussion
 - Individual manufacturer's analyses for consideration of a specific CPT code!
5. The Tier 1 Subworkgroup, completing its tasks, has been inactivated.



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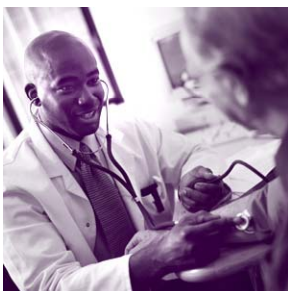
Tier 2 Subworkgroup Work Report

1. Prepared proposal #3696 that will be discussed tomorrow at the Editorial Panel
2. Reviewed and made recommendations on germane Public Comments (Tier 2 code and introduction modifications)
3. Continues to work through GeneTests listings
 - a. Each Active MoPath expert subworkgroup member was given a “small” group of analyses to provide suggested analytes to be included in the current Tier 2 Level codes (approximately 200 additional listings will be discussed in this exercise).
 - i. Deletion/Duplications will not be added at this time.
 - ii. One area received intense discussion:
Level IV- Known familial variant not otherwise specified, for gene listed in Tier 1 or Tier 2, DNA sequence analysis, each variant exon
 - b. Following this we will address the 340 proposed analyses from the Public Comment period.
 - c. Then we will likely go back to the GeneTests Listings





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Stacking Code Retirement

1. Currently we have 234 analyses either accepted or pending CPT Editorial Panel approval.
2. This likely accounts for >99% of of the volume all medically necessary MoPath analyses performed.
3. How many will be enough to justify retirement of the current stacking codes?
4. Are their codes that should be considered to be retained?
5. What will be the downside of stacking code retirement?



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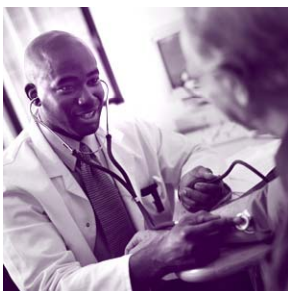


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Thank you to:

- The Tier 1 Subworkgroup Members
 - Enjoy your inactivation! (after 47 telemeetings!)
- The Tier 2 Subworkgroup Members
 - Darth Vader is still alive!
- Our supportive *AMA-CPT* Staff
 - Desiree Rozell and Lianne Stancik
 - Dehandro Hayden and Caryn Anderson
 - All of the other “fill-ins”
- Dr. Andy McGuire, our retiring Co-chair
 - To be replaced by Dr. Chris Jagmin