



Statement on Lobbying

Applicants and other interested parties must not engage in “lobbying” for or against code change applications. “Lobbying” means **unsolicited** communications of any kind made at any time (including during Editorial Panel meetings) for the purpose of attempting to influence either (1) the CPT[®] Advisors’ evaluation of or comments upon a code change application or (2) voting by members of the Editorial Panel on a code change application. **Lobbying is strictly prohibited. Violation of the prohibition on lobbying may result in sanctions, such as being barred from further participation in the CPT process.** Information that accompanies a code change application, presentation or commentary to the full Editorial Panel during an open meeting and responses to inquiries from a Panel member or a CPT staff member do not constitute “lobbying.”

In order for the CPT Editorial Panel to effectively review and act on proposed changes to the CPT code set, code change applications must be reviewed by the CPT Advisors and the Editorial Panel based on the information contained in the application and available clinical literature. CPT staff are responsible for organizing and submitting information to the CPT Advisors and the Editorial Panel for consideration. Information relating to a code change application must be submitted to CPT staff no later than thirty days prior to the start of the Editorial Panel meeting at which the code change application will be considered. In some cases, the Chair of the Editorial Panel may establish rules which allow for supplemental submissions of information to workgroups or facilitation sessions established by the Chair or for postponed or appealed agenda items. (A facilitation session is an informal meeting requested by the Chair during a CPT Editorial Panel meeting to allow interested parties to confer and attempt to reach a consensus recommendation for presentation at the meeting.)

During development of a code change application, an applicant may seek input or assistance from staff or advisors of medical specialty societies but may not engage in “lobbying” as defined above. Medical specialty societies may have their own policies governing interactions with applicants or other interested parties regarding code change applications. The AMA encourages

medical societies to work with applicants, from both industry and other medical specialty societies, to assure that code change applications are complete, coherent and consistent with current medical practice. Contacts with consulting medical societies should be limited to that which is necessary to construct and submit the code change application. After the date a code change application is posted for review and comment by the CPT Advisors and the Editorial Panel, contact between an applicant and medical society representatives should be confined to communications pertaining to feedback from the CPT staff or Advisors' comments regarding the application. If an applicant or other interested party wishes the CPT Advisors or the Editorial Panel to consider additional information, that information must be submitted to AMA's CPT staff and not directly to the CPT Advisors or the Editorial Panel.

Applicants and other interested parties are invited to participate in open CPT Editorial Panel meetings and present their views on code change applications when recognized by the Chair during the course of the meeting. The views of applicants and other interested parties may be sought during work group or facilitation sessions established by the Chair and participation in a workgroup or a facilitation session is not considered lobbying.