



The CPT® Editorial Panel Ad Hoc Workgroup Organizational Structure and Processes October, 2011

Workgroups are an integral part of the Current Procedural Terminology (CPT®) process and are established by the CPT Editorial Panel (the Panel) to engage various stakeholders in the CPT process in the development of options for consideration by the Panel. Workgroups do not replace the CPT process, which requires input from the CPT Advisory Committee and the Health Care Professionals Advisory Committee (together the CPT/HCPAC Advisory Committee or "CPT Advisor(s)").

There are two types of workgroups in the CPT process; (a) standing workgroups and (b) workgroups that are established by the Panel on an *ad hoc* basis. Reaching consensus, as defined in section IV.G (below), is the goal of all workgroups. Members of all workgroups are not to advance a personal or proprietary interest. Ad Hoc workgroups are formed at the request of the Panel to address specific complex coding issues requiring time and expertise for discussion and development of coding options beyond that which is available at a Panel meeting.

The purpose, composition, operating procedures and related matters for each type of workgroup will be addressed in separate documents. This document deals only with Ad Hoc workgroups.

- I. The Panel Chair shall establish Ad Hoc workgroups by applying the following processes and guidelines:
 - A. Appointment of Workgroup Co-Chairs
 1. The Panel Chair will appoint two or more workgroup co-Chair(s) with the following qualifications:
 - a. Neither they, nor their immediate families have a conflict of interest (COI) related to the subject matter or potential outcome of the workgroup (i.e. no conflict under the current workgroup COI policy available from the AMA).
 - b. They have the background, skills to lead a workgroup and/or expertise appropriate for the issues to be addressed by the workgroup.
 - c. Whenever possible, at least one workgroup co-Chair does not regularly perform the service or procedure under review.
 2. At least one workgroup co-Chair shall be a Panel member, and other co-Chair(s) shall be one of the following:
 - a. Panel member;
 - b. Staff of American Hospital Association (AHA), American Medical Association (AMA), Blue Cross Blue Shield (BCBS), Centers for Medicare and Medicaid Services (CMS), America's Health Insurance Plans, American Health Information Management Association, and American Academy of Professional Coders; or
 - c. CPT Advisor.

B. Workgroup Charge Statement

The Panel Chair will define the issues to be addressed by the workgroup and the proposed output (e.g., code change proposal, report to Panel, recommendations for new codes) in a written workgroup charge statement, with input, if requested by the Panel Chair, of the workgroup co-Chair(s).

C. Workgroup Timeframe Assignment

The Panel Chair will determine, with input from the workgroup co-Chair(s), the timeframe for completion of the workgroup responsibilities. The Panel Chair may at any time provide further direction to the workgroup by (a) redefinition of the workgroup charge statement, and/or (b) changing workgroup timeframes and deadlines.

D. Replacement of Workgroup Co-Chair(s)

The Panel Chair may remove workgroup co-Chair(s) with the concurrence of the Executive Committee or replace co-Chair(s) as needed without Executive Committee concurrence due to vacancy created by resignation or cessation of workgroup co-Chair(s) possessing the above qualifications (e.g., term on Panel ends or CPT Advisor resigns).

E. Facilitate the Workgroup by Seeking Guidance

After consultation with the workgroup co-Chair(s), the Panel Chair may direct workgroup co-Chair(s) to facilitate the workgroup by seeking advice from the Executive Committee or Panel.

II. The Workgroup co-Chair(s) have the following responsibilities:

- A. Work with the Panel Chair to draft the workgroup charge statement, as requested;
- B. Work with AMA staff to establish the meeting schedule and workgroup goals and key milestones within the timeframes defined by the workgroup charge statement, Panel meeting schedules or other deadlines established by the Panel Chair;
- C. Work with AMA staff to identify organizations that may be appropriate to designate workgroup members such as medical specialty societies, industry, other provider professional societies not represented on the CPT/HCPAC Advisory Committee and/or others required by the workgroup charge statement;
- D. Designate, with the concurrence of the Panel Chair, subject matter experts to address a limited, specific issue or document. Such individuals shall comply with the workgroup COI policy and execute confidentiality agreements as provided by AMA staff;
- E. Designate, with the concurrence of the Panel Chair, observers, [to participate in workgroup meeting(s) without an official workgroup role] including but not limited to payer representatives to attend specific workgroup meeting(s). Such individuals shall comply with the workgroup COI policy and execute confidentiality agreements as provided by the AMA;

- F. Assist AMA staff, when requested, to ensure all necessary policies and procedures have been followed. This includes obtaining signed confidentiality and COI statements from workgroup members and dismissing a workgroup member from a meeting if it is determined that the member has not complied with pertinent confidentiality and COI requirements;
- G. Communicate and follow CPT procedures related to workgroup confidentiality and COI requirements;
- H. Objectively communicate at all times, both orally and in writing, to adequately reflect all opinions of the workgroup;
- I. Work with AMA staff (and at the workgroup co-Chairs' discretion, specified workgroup member[s]) to construct an agenda for each meeting, to be disseminated by AMA staff;
- J. Have the sole authority, in cooperation and conjunction with AMA staff, to direct the dissemination of workgroup materials (i.e. workgroup options, code change applications or recommendations) to the workgroup, CPT Advisors, the Executive Committee, the Panel or individual Panel members, as appropriate under the CPT process;
- K. Promptly review and comment on the minutes of each workgroup meeting, prepared and disseminated by AMA staff, with such revised minutes to be distributed by AMA staff to the workgroup;
- L. Lead workgroup meetings with the goal of reaching consensus (as defined in section IV.G) by:
 - 1. Promoting decorum and mutual respect between workgroup members; and
 - 2. Facilitating equal opportunities for participation by all workgroup members;
- M. Assess the need for revision of the workgroup charge statement and convey these observations to the Panel Chair for consideration;
- N. In consultation with the Panel Chair, hold executive session(s) or form sub-workgroups (of limited duration to address defined issues) for the purpose of facilitating the efficiency of the workgroup agenda. Such executive sessions and sub-workgroup meetings may be attended by the workgroup co-Chair(s), AMA staff, the Panel Chair and/or Vice Chair and, if necessary, such voting and non-voting workgroup members and/or Panel members as requested by the workgroup co-Chair(s). The workgroup co-Chairs will report to the full workgroup the details (e.g. date, place and attendees) and the results of executive sessions or sub-group meetings;
- O. Assist AMA staff in preparing a written summary of the workgroup activity(s) for inclusion in the Panel agenda as an informational item at each Panel meeting. The summaries will be presented by the workgroup co-Chair(s) at each Panel meeting;
- P. Seek guidance from the Executive Committee or Panel if the workgroup becomes deadlocked due to fundamental disagreements among workgroup members;
- R. Review any proposed Panel agenda item (e.g., code change application, supporting literature, position statement) prepared by AMA staff upon conclusion of the workgroup deliberations prior to dissemination for review by CPT Advisors;

- S. Terminate role as workgroup co-Chair(s) when the Panel votes on the relevant proposal, unless otherwise indicated by the Panel Chair; and
 - T. Perform such other duties as requested by the Panel Chair related to the workgroup charge statement.
- III. Workgroup Establishment and Qualifications of Workgroup Members
- A. Notification of formation of workgroups will be posted on AMA's public website with the goal of seeking stakeholders' interest in membership in the workgroup. AMA may send out additional notifications of the formation of new workgroups.
 - B. Invitations for workgroup membership will be sent out by the AMA to interested specialty societies, industry, other provider societies and/or others as specified by the workgroup co-Chair(s), in consultation with AMA staff, and as required by the workgroup charge statement. Workgroup membership will be voting or non-voting as specified in sections III.F and G.
 - C. Invited organizations may designate one individual to be a member of the workgroup. All workgroup members shall meet the following requirements:
 - 1. Be a Doctor of Medicine or Doctor of Osteopathy, unless they are a member of the CPT/HCPAC Advisory Committee or representing other non-physician healthcare providers (Those members serving on an existing Ad Hoc workgroup prior to the effective date of this document shall continue to serve on such workgroups as members regardless of meeting the MD/DO or non-physician provider status);
 - 2. Perform or represent those who perform the service under consideration by the workgroup; and
 - 3. Have the expertise and interest necessary to contribute to the workgroup.
 - D. Organizations should designate in writing one member per organization (medical specialty, other provider organizations, company), one non-voting staff person, and, when deemed appropriate by the workgroup co-Chair(s), may appoint an alternate member for one or more meetings, to attend workgroup meetings.
 - E. Organizations that have a member on a workgroup shall not take any actions that violate or circumvent the workgroup process.
 - F. Voting organizations (with one voting member):

Voting organizations are those organizations that have a CPT Advisor on the CPT/HCPAC Advisory Committee.

Voting members are expected to provide the workgroup with background information for medical procedures or services in order to add a balance of information and to provide for timely, forward-thinking input for maintenance of the CPT code set.

G. Non-Voting organizations (with one non-voting member):

1. Industry

Industry organizations (i.e. a company or organization that sells products or represents the interests of others who sell products) that are invited to participate in a workgroup are non-voting organizations. Industry representatives are expected to provide the workgroup with technical background information regarding relevant proprietary and other products and services and to provide timely and accurate input for the maintenance of the CPT code set. Participation in a CPT workgroup is limited to parties with relevant interest related to current technology and the procedural aspects of the medical procedure(s), service(s), or test(s). Participation is not intended to advance the proprietary interests of the company or organization.

2. Other Companies and Organizations

Representatives of other companies and organizations, including payers and other healthcare provider organizations that do not have a CPT Advisor, that are invited to participate in a workgroup are non-voting organizations. Representatives of these organizations are expected to provide other relevant expertise in the subject of the workgroup.

IV. General Workgroup Process

- A. Workgroups shall only address issues related to the workgroup charge statements. Workgroup meeting discussions will be restricted to the agenda items;
- B. Workgroup co-Chair(s) and AMA staff will, with input from the workgroup members, set an appropriate meeting schedule (frequency, dates) for the workgroup;
- C. Workgroup meetings will be restricted to the meeting agenda provided by the AMA, in consultation with the workgroup co-Chair(s). At their discretion, the workgroup co-Chair(s) may make inquiry of the workgroup as to the completeness and order of the agenda and amend the agenda accordingly;
- D. Workgroup meetings may take place in person, by telephone or other electronic means as determined by the co-Chair(s) in consultation with AMA staff;
- E. Workgroup attendees will be reminded at each meeting of the necessity of adherence to workgroup confidentiality and COI requirements in accordance with Sections V. B., C. and VII. D;
- F. Quorum and voting requirements will be in accordance with Section VI;
- G. Workgroups shall strive to reach consensus on issues. Consensus is a general agreement, but not necessarily unanimity, resulting from a process that attempts to fairly consider all comments, resolves conflicting recommendations, and permits participants to change their position;
- H. Workgroup co-Chair(s) may communicate with members (including canvassing) to determine the progress of the workgroup toward reaching consensus;
- I. Where consensus cannot be reached, workgroups shall develop an appropriate number of options for resolving an issue(s) and seek Executive Committee direction, which in turn may seek Panel direction when appropriate;

- J. Workgroup co-Chair(s), with input from AMA staff, shall submit final workgroup output (1) in a CPT code change application for review by the CPT Advisors and consideration by the Panel, and/or (2) provide other output to the Panel such as a report or recommendations concerning codes in a manner consistent with the CPT process;
- K. The workgroup will be disbanded upon completion of the responsibilities defined in the workgroup charge statement. The Executive Committee may disband any workgroup at any time upon notice to the workgroup members. Activities of the workgroup are completed when the workgroup is disbanded unless otherwise indicated by the Panel Chair; and
- L. Panel members and their associated staff may participate in workgroup(s) with the approval of the Panel Chair and/or workgroup co-Chair(s). All Panel members and associated Panel staff will have access to all workgroup minutes.

V. Responsibilities of Workgroup Members

All voting and non-voting members shall:

- A. Attend meetings regularly, provide input and deliberate on issues in accordance with the workgroup charge statement;
- B. Comply with the workgroup confidentiality and COI requirements;
- C. Execute and abide by confidentiality and copyright assignment agreements as provided by AMA;
- D. Comment on and base evaluation solely on respective criteria for CPT Category I and Category III codes intended to describe procedures and services performed by physicians and other qualified health care providers;
- E. Submit all materials proposed for workgroup review to AMA staff. Workgroup co-Chair(s), in consultation with AMA staff, will make the final determination which materials are to be distributed to workgroup members;
- F. Exercise objective, independent, evidence-based judgment;
- G. Conduct all communications with other workgroup participants in a transparent, professional and businesslike manner and not attempt to exert undue influence on workgroup participants; and
- H. Provide timely review and comment on minutes of workgroup meetings.

VI. Quorum and Voting Requirements

- A. A quorum is constituted where the majority of the voting members of a workgroup is in attendance in person, by telephone or other electronic means or responds to a ballot vote. An affirmative vote of a simple majority of voting members carries an action.
- B. Each voting member of a workgroup shall have one vote on any single matter before the workgroup. Alternate members may vote in the absence of the voting member. Members may vote by absentee ballot. Proxy voting is not permitted at any workgroup meeting. In the event of a tie vote, workgroup co-Chair(s) shall confer to see if they can exercise one vote to break a tie vote. In the event the workgroup co-Chair(s) cannot come to agreement among themselves to break a

- C. The workgroup co-Chairs shall have the discretion to determine which matters will be submitted for vote.

VII. Conduct of Workgroup Meetings/Conference Calls

- A. Only workgroup co-Chair(s), appointed workgroup members, alternates and their designated staff for that specific workgroup, subject matter experts and/or observers invited by the workgroup co-Chair(s) and AMA staff may attend workgroup meetings/conference calls;
- B. Meetings shall begin with the workgroup co-Chair(s) reiteration of workgroup confidentiality and COI requirements;
- C. At the beginning of an oral presentation, presenters must verbally disclose any conflicts of interest disclosed on their COI statement or arising since submittal of their COI statement;
- D. Participants are required to be present for meetings or log in to conference calls in advance of the time set by workgroup co-Chair(s) and/or staff to allow AMA staff to verify compliance with workgroup confidentiality and COI requirements, or participants may be disallowed to join the call;
- E. Minutes are generated by AMA staff following each meeting, and are forwarded to the workgroup co-Chair(s) for review and refinement. Upon co-Chair(s) completion, the minutes are forwarded to the workgroup members for review and approval in a manner designated by the workgroup co-Chair(s);
- F. Workgroup representation shall be determined by the workgroup co-Chair(s) in consultation with AMA staff in accordance with Section II.C above; and
- G. Meetings shall be conducted according to the *Sturgis Standard Code of Parliamentary Procedure* or other such parliamentary procedure as adopted by the Panel. In the event of a conflict between this document and parliamentary procedures, this document will govern.

VII. Disqualification

Ethical and professional conduct is expected of all workgroup members. All workgroup members are subject to and are expected to comply with all requirements applicable to specific roles as identified in this document, the workgroup confidentiality and COI requirements.

Any breach of these operating procedures, the workgroup confidentiality or COI requirements will be reported to the Executive Committee by the workgroup co-Chair(s) for consideration and recommendation to the Panel.

The Panel may remove a voting or non-voting workgroup member for reasons of unethical and/or unprofessional conduct or for failure to comply with this document, workgroup confidentiality and/or COI requirements, or for lack of participation in the workgroup. At least fourteen (14) days prior to a vote, which may result in the removal of a workgroup member by the Panel, AMA staff will give the workgroup member, and the sponsoring organization written notice of the pending vote and shall invite the workgroup member and the member's sponsoring organization to present information via written statement to the Executive Committee as to why removal is inappropriate. An organization may replace its representative workgroup member at its discretion to avoid a pending vote of member disqualification. If requested by either the Executive Committee



or by the workgroup member, an opportunity will be offered to the workgroup member to verbally present the member's position and/or to respond to Executive Committee questions. The Executive Committee shall serve as the investigation and hearing committee (i.e., responses, verbal presentations) and make its recommendation to the Panel no later than twenty (20) days following Executive Committee consideration. Removal of a member requires a vote of two-thirds vote of the Panel. After the vote, the workgroup member shall be informed of the decision in writing. Decisions of the Panel related to workgroup member removal may not be appealed.

VIII. Adoption and Amendment

This document shall be adopted or amended when approved by a simple majority vote of the Panel.