What’s the news: The AMA and 127 other state medical associations and national medical specialty societies that represent hundreds of thousands of U.S. doctors are urging payers to “immediately implement and pay for Current Procedural Terminology (CPT®) code 99072 to compensate physician practices for the additional supplies and new staff activities required to provide safe patient care” during the COVID-19 public health emergency without patient cost-sharing.

CPT code 99072, approved by the CPT Editorial Panel in September, describes the extra supplies and clinical staff time required to perform safety protocols for the provision of evaluation, treatment or procedural services during a public health emergency in a setting where extra precautions are taken.

The code was developed in response to measures taken by medical practices and health care organizations to curtail the spread of COVID-19 and protect patients and health professionals while also providing access to high-quality care. The official descriptor for the code notes that it covers additional materials and staff time “over and above those usually included in an office visit” or other non-facility services.

The payment for CPT code 99072 should happen “with no patient cost-sharing” during the public health emergency, the AMA and the other physician organizations said in letters to the Centers for Medicare & Medicaid Services (CMS), insurer trade organizations (America’s Health Insurance Plans and Blue Cross Blue Shield Association), and major national commercial insurers (Aetna, Anthem Inc., Cigna Corp., Health Care Service Corp., Humana and UnitedHealth Group).
Why it’s important: An AMA survey of 3,500 physicians found that 81% said their revenue was still lower than prior to the pandemic, with an average revenue drop of 32%. “Compounding the financial stress of lost revenue, practices are also incurring additional costs for heightened infection-control protocols and personal protective equipment (PPE),” say the letters from the AMA and the other physician organizations to CMS and private payers.

Practice owners reported an average 57% rise in spending on PPE since February, with 25% saying PPE expenses have risen at least 75%. Of the doctors surveyed, 99% said they have implemented protocols such as pre-visit screening calls, screening for COVID-19 symptoms or exposure and checking patient temperatures upon office arrival, and limiting the number of patients in the waiting room. Find out more about how the AMA’s survey details the depth of the pandemic’s financial impact on physician practices.

The AMA/Specialty Society RVS Update Committee (RUC) requested in its comment letter on the proposed 2021 Medicare physician payment schedule that CMS immediately implement and pay for CPT code 99072.

Learn more: Find out how the AMA is fighting every day to remove the obstacles physicians face while confronting the COVID-19 pandemic.