



CPT[®] Editorial Summary of Panel Actions February 2018

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Please be aware that this action is a reflection of the discussion at the most recent Panel meeting. Disclosure of Panel action and deliberation is limited to the information contained in this Summary of Actions. Premature release of coding information other than that contained in this document is prohibited under the [CPT Confidentiality Agreement](#). Codes are not assigned, nor exact wording finalized, until just prior to publication. Release of more specific CPT[®] code set information is timed with the release of the entire set of coding changes in the CPT publication.

If an applicant or other interested party believes an action of the CPT Editorial Panel was in error, that individual or entity may request reconsideration of the Panel action. An "interested party" is an individual or entity that may potentially be impacted by the Panel's decision, regardless of whether they participated in the Panel's original consideration of the matter.

Submitting the Request: Requests for reconsideration must be received by AMA staff no later than midnight, Central, March 23, 2018, fourteen (14) days after the published posting date (March 9, 2018) of the Summary Grid of Editorial Panel Actions on the CPT website www.ama-assn.org/go/cpt. The request should contain (1) the specific action requested for reconsideration; (2) the basis for the reconsideration request; and (3) all information relevant to the matter, including any literature (whether favorable or adverse) related to the requestor's position. Requests for reconsideration and relevant information must be in writing and submitted to:

Marie Mindeman
Director, CPT Coding, Editorial and Regulatory Services
American Medical Association
AMA Plaza
330 N. Wabash Ave., Suite 39300
Chicago, IL 60611-5885

Participation by Interested Parties: The receipt of a request for reconsideration, the identity of the party seeking such, and a brief summary of the basis for the reconsideration request will be noted in the summary grid of Editorial Panel actions for the agenda item. The applicant and interested parties are responsible for monitoring postings to the CPT website with respect to requests for reconsideration. CPT staff will make reasonable efforts to identify potentially interested parties and notify them of the receipt of the request for reconsideration and the opportunity to be heard. An interested party seeking to comment on the request for reconsideration should submit its comments within fourteen (14) days of the posting of the notice (see deadline in **Submitting the Request** above) in the summary grid of Editorial Panel actions that a request for reconsideration has been received. Comments should include (i) a statement of the nature of the commenter's interest in the issue, (ii) the specific comment and reason for the comment, and (iii) all relevant material including any literature (whether favorable or adverse) related to the commenter's position. Comments should be submitted to the Director of CPT Editorial Research & Development at the address shown above. The applicant(s) who submitted the original code change proposal is automatically considered an interested party and will receive notice of any request for reconsideration submitted by another party.

Note: Codes that contain an 'X' (e.g., 1002X4, 234X2X, 0301XT) are placeholder codes that are intended, through the first three digits, to give readers an idea of the proposed placement in the code set of the potential code changes. These codes are not used for claims reporting and will be removed and not retained when the final CPT Datafiles are distributed on August 31st of each year. To report the services for 'X' codes, please refer to the actual codes as they appear in the CPT Datafiles publication distributed on or before August 31st of each year.

Tab #	Name	Code #	Description of Editorial Panel Action
6	Incision and Drainage Soft Tissue Abscess-Delete 20005	20005	Accepted deletion of code 20005
7	Stabilization Extra-osseous Talotarsal Joint (EOTTS)	0335T 07X3T 07X4T	Rescinded the Feb 2017 action to delete code 0335T to report sinus tarsi implant insertion; and accepted addition of Category III codes 07X3T, 07X4T to report removal and removal with reinsertion of sinus tarsi implants
8	Strapping Instruction Revisions-29540, 29580, 29581	29540 29580 29581	Accepted revision of instructions in Surgery Strapping-Any Age and Cardiovascular Venous subsections
9	Chimeric Antigen Receptor T cell (CAR-T) Therapy	-----	WITHDRAWN
10	Hypoglossal Nerve Stimulator Procedures	-----	WITHDRAWN
11	Non-Imaging Guidance	-----	Accepted revision of the Imaging Guidance guidelines; revision of Interpretation; Written Report(s) guidelines in the Radiology Guidelines; revision of the Magnetic Resonance Guidance subheading; editorial revision of codes 77021, 77022 to include "imaging"; and revision the Imaging Guidance guidelines in the Medicine Guidelines to clarify reporting for non-imaging guidance.
12	Myocardial Positron Emission Tomography- WITHDRAWN	-----	WITHDRAWN
13	Tier 1 BRCA1 BRCA2 81162	81162 81211 81212 81213 81X78 81X79 81X81 81X82 81X83	Accepted addition of five new codes to report full sequence analysis, full duplication/deletion analysis and BRCA1 and BRCA2; revision of code 81162 to include full duplication/deletion analysis; revision of 81216 to include the HUGO gene

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			name; and deletion of codes 81211, 81213, 81214
14	Tier 1 NUDT15	8X000	Accepted addition of a Tier 1 code 8X000 to report gene analysis for NUDT15 (nudix hydrolase 15) (eg, drug metabolism)
15	Tier 1 SMN1-SMN2	8X032 8X033 8X034	Accepted addition of three Tier 1 codes 8X032, 8X033 and 8X034 to report gene analysis for SMN1/SMN2
16	Tier 1 TERT	80X00	Accepted addition of a Tier 1 code 80X00 to report gene analysis for TERT, targeted sequence analysis
17	Tier 1 Triple Repeat Disorder	81401 8X011 81404 8X013 81405 8X014 81406 8X015 81407 8X016 8X001 8X017 8X002 8X018 8X003 8X019 8X004 8X020 8X005 8X021 8X006 8X022 8X007 8X023 8X008 8X024 8X009 8X025 8X010 8X026 8X027 8X028	Accepted deletion of references to analysis of the following genes in the Tier 2 Molecular Pathology code section <i>AFF2, AR, ATN1, ATXN1, ATXN10, ATXN2, ATXN3, ATXN7, ATXN8OS, CACNA1A, CNPB, CSTB, DMPK, FXN, HTT, PABPN1, PPP2R2B, TBP</i> ; and addition of 30 new Tier 1 codes to report analysis of the above referenced genes
18	MAAA Bladder Cancer Recurrence Risk	8X029	Accepted addition of code 8X029 to report an administrative MAAA code to report analysis of bladder cancer recurrence risk
19	MAAA Bladder Cancer Risk	8X030	Accepted addition of code 8X030 to add an administrative MAAA code for analysis of bladder cancer risk
20	MAAA Thyroid Cancer Risk WITHDRAWN	-----	WITHDRAWN

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21	Dihydrotestosterone (DHT) Chemistry Test	80X01	Accepted addition of code 80X01 to identify dihydrotestosterone testing for medical purposes
22	Ophthalmoscopy-92225 92226	92225 92226 92X18 92X19	Accepted addition of codes 92X18, 92X19 to specify the eye anatomy examined for services beyond the normal comprehensive eye exam and deletion of codes 92225, 92226
23	Pattern Electroretinography	-----	WITHDRAWN
24	Thermodilution Studies-93561 93562	-----	WITHDRAWN
25	Intraoperative Neurophysiologic Monitoring	-----	WITHDRAWN
26	Sleep Study-Delete 95801	-----	WITHDRAWN
27	Long-Term EEG Monitoring	-----	Postponed
28	Drug Administration and Titration via Gastrostomy Tube	-----	Rejected
29	Cat III Extracorporeal Shock Wave Therapy 06X1T, 06X2T	06X1T 06X2T	Accepted addition Category III codes 06X1T, 06X2T to report extracorporeal shockwave technology
30	Cat III Insertion Aqueous Drainage Device	-----	Rejected
31	Cat III Intraoperative Visual Axis Identification	06X4T	Accepted addition of Category III add-on code 06X4T to report intraoperative visual axis identification
32	Cat III Wireless Cardiac Stimulation	06X5T-07X0T 76000 76998	Accepted addition of eight Category III codes and a new subsection to report wireless cardiac stimulation services; and revision of existing

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			instructions following 76000 and 76998 to report insertion, removal, removal with replacement, interrogation, and programming for a wireless cardiac stimulator system.
33	Category III Sundown	0357T, 0071T, 0072T, 0075T, 0076T, 0198T, 0200T, 0201T, 0202T, 0205T, 0206T, 0207T, 0341T, 0342T, 0345T, 0347T, 0348T, 0349T, 0350T, 0351T, 0352T, 0353T, 0354T, 0355T, 0356T, 0358T, 0375T, 0377T, 0378T, 0379T, 0380T	Accepted retention of Category III codes, 0071T, 0072T, 0075T, 0076T, 0198T, 0200T, 0201T, 0200T, 0201T, 0202T, 0207T, 0345T, 0347T, 0348T, 0349T, 0350T, 0351T, 0352T, 0353T, 0354T, 0355T, 0356T, 0378T, 0379T Accepted archiving of Category III codes, 0205T, 0206T, 0341T, 0342T, 0357T, 0358T, 0375T, 0377T, 0380T
34	Code Set Maintenance	-----	Postponed
35	Category I-III Literature Workgroup Application Revisions	-----	Accepted revision of the Literature section of the Category I-III code change application
36	Short Form Code Change Application Revision	-----	Accepted revision of the Short Form Code Change Application
37	Absolute Quantitation Myocardial Blood Flow-78X35, 0482	-----	WITHDRAWN
38	Alcohol and/or Substance Abuse Assessment and Intervention Service	-----	Postponed
39	PLA Q1 Codes (Consent Calendar)		Accepted addition of 10 Proprietary Laboratory Analysis codes
40	CPT Smart App Editorial Revisions	-----	Accepted revision of the Category I/III; 2) Pathology/Laboratory; and the 3) MAAA applications to facilitate completion of the Smart App automation process.
EC-B	Percutaneous Mechanical Thrombectomy Guideline Revision	37184 37185	Accepted revision to the Arterial Mechanical Thrombectomy guidelines codebook to clarify the accuracy of the instruction that modifier 51 be

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			recommended for use of code 37184 with the add-on code 37185
EC-C	Radiation Treatment Delivery	77387	Accepted editorial revision of code 77387
EC-D	Request for Reconsideration – Carbon Dioxide Tension Measurement	-----	Rejected
EC-E	Request for Reconsideration – Hypoglossal Nerve Stimulator Procedures	-----	WITHDRAWN
EC-F	:Request for Reconsideration – Pattern Electroretinography	-----	Rejected
EC-G	PLA Issues Issue #1- Application of IP Process to PLAs	-----	Accepted revision of (1)instructional materials on the PLA web site to support the implementation of the IP process for PLA applications; (2) revision of PLA applicant FAQs to alert applicants to the potential for IP application review; (3) approved sharing questions #1-#8 of the PLA application as expected fields of review for the IP process
EC-G	PLA Issues Issue #2- PLA Application Revision	-----	Accepted revision of the PLA code change application
EC-G	PLA Issues Issue #3: Change to Instructions for PLA Codes	-----	Informational
EC-G	PLA Issues Issue #4: PLA to Category I	-----	Informational
EC-G	PLA Issues Issue #5: Deletion of Codes	-----	Informational
EC-H	Endomyocardial Biopsy	93505	Accepted deletion of instructions following code 93505
EC-I	Category III Effective Date Revisions	-----	Accepted editorial revision of the Category III guidelines to clarify the intent of early release policy
EC-J	Status of CPT Workgroups	-----	Informational
EC-K	Strategic Issues Session Topics	-----	Informational

Tab #	Name	Code #	Description of Editorial Panel Action
EC-L	Recommendations Concerning the Interested Parties Process and Requests for Reconsideration	-----	Informational
EC-M	Remote Patient Monitoring With Care Management	994X9	Accepted editorial revisions of the introductory language of the new chronic care remote physiologic monitoring codes
EC-N	RUC Issues Issue #1 AMA/Specialty Society RVS Update Committee Administrative Subcommittee	-----	Informational
EC-N	RUC Issues Issue #2 Psychological or Neuro psychological Test Administration (96X11)	96X11	Rescinded the June 2017 Panel action to add code 96X11
EC-N	RUC Issues Issue #3 Hemi-Aortic Arch Replacement (33860, 33863, 33864, 33X01)	33X01 33860-33864	Accepted revision of the Thoracic Aortic Aneurysm guidelines and revisions of the instructions following code 33860-33864
EC-N	RUC Issues Additional Business	-----	Informational
EC-O	October 2017 RUC Report	-----	Informational
EC-P	Revisions to the Structure and Procedures of CPT® Editorial Panel	-----	Informational
EC-Q	CPT Assistant Editorial Board Report	-----	Informational