

Proposed Panel Agenda

February 2019 CPT® Editorial Panel Meeting

The proposed agenda for the February 2019 CPT Editorial Panel meeting shows the code application names, code(s) affected, and a description of the request. The Code Numbers and Request Descriptions detailed in this document are extracted from Code Applications submitted for discussion at this meeting. **Until such time as the CPT Editorial Panel acts on these requests, the information that appears in this Proposed Agenda is provided for informational purposes only, giving interested individuals the information to help determine whether or not to attend the meeting and provide comment on a given topic(s).**

Codes that contain an 'X' (e.g., 1002X4, 234X2X, 0301XT) below 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 31, 2019. To report the services for "X" codes listed on this form, please refer to the actual codes as they appear in the CPT Datafiles publication distributed on August 31, 2019.**

Upon review of this agenda, if the reviewer believes that they will need to provide comment on an issue, they should send a request for a copy of the application and associated materials to [Michael Pellegrino](#). This request for review of the agenda materials should contain the identity of the interested party seeking such and a brief summary of the basis for the request (e.g., associated vendor/ industry representative).

Any interested parties wishing to provide written comments on any agenda items should be aware of the following relevant deadlines for provision of written comments on the agenda to ensure comment review by all parties. Additional verbal comments on any issue can be provided in person at the Panel meeting following a statement of conflict of interest. The applicant(s) who submitted the original code change application is automatically considered an interested party and are notified by AMA staff of any request for review submitted by another party.

*Interested party requests will not be processed until the interested party submits a signed confidentiality agreement and disclosure of interest form. Interested party requests will be processed within 5 days of receipt of the requested forms. Commenters will follow the deadline instructions in the correspondence provided by AMA staff. The deadline for request to review any non-Pathology/Laboratory code change applications is **November 30, 2018**. The deadline for submission of written comments for non-Pathology/Laboratory applications is **January 25, 2019**.

Updated December 7, 2018

- New
- ▲ Revision
- ⊕ Add on
- D Deletion

Issues	Tabs	Deadline to Request Materials	Comments Deadline (Noon, CST)
All Non-Pathology Issues	6-12, 16-23, 25-33	January 18, 2019	January 25, 2019
Path/Lab (other than MoPath)	13-15, 24	November 30, 2018	December 3, 2018

During the time between now and the Panel meeting, the agenda will, most likely, be modified to reflect changes – additions, deletions or updates. Please check back frequently for the most up to date information. Outcomes on these actions will be found in the CPT Editorial Panel Summary of Actions for the February 2019 meeting which will be published on or before March 11, 2019 to the CPT home page of the [AMA website](#).

Tab #	Name	Code #	Request-Description
6	Office or Other Outpatient Services	D99201 99202-99215	Delete 99201; revise 99202-99215; revise and restructure E/M Introductory guidelines concerning office and other outpatient codes
7	Prolonged Services With or Without Patient Contact	●99XXX	Add code 99XXX to report prolonged services with or without direct face-to-face contact with patient
8	Care Management Services	▲99490 ●994XX ▲99487 ▲99489	Revise Care Management Services guidelines, Chronic Care Management guidelines, code 99490 for the "first 20 minutes" and add add-on code 994XX. Revise Complex Chronic Care guidelines, and revise codes 99487, 99489 to remove requirement for "substantial revision" to a care plan

Tab #	Name	Code #	Request-Description
9	Breast Reconstruction	▲19318 ▲19325 ▲19328 ▲19330 ▲19340 ▲19342 ▲19357 ▲19361 ▲19364 ▲19367 ▲19368 ▲19369 ▲19370 ▲19371 D19324 D19366	Revise codes 19318, 19325,19328, 19330, 19340, 19342,19357,19361, 19364, 19367,19368,19369, 19370, 19371 and delete codes 19324, 19366
10	Posterior Lumbar Arthrodesis and Decompression	▲22630 ▲22633	Editorially revise codes 22630, 22633 to clarify that decompression at a single level is not included in codes 22630-22634 and may be reported separately, when performed
11	Lung Biopsy-CT Guidance Bundle	▲32405 ●324X0	Revise code 32405 to describe percutaneous needle lung biopsy without computed tomography guidance, and add code 324X0 to report percutaneous needle lung biopsy with computed tomography guidance
12	Percutaneous Ventricular Assist Device Insertion	●339X1 ▲33990 ▲33991	add code 339X1 to describe the insertion of ventricular assist device venous access only and revise codes 33990 and 33991

Tab #	Name	Code #	Request-Description
13	Adm MAAA-Fetal Aneuploidy Analysis-Delete 0009M	D0009M	Request to delete code 0009M
14	Tier 2 to Tier 1 Palb2	<ul style="list-style-type: none"> ●813X1 ●813X2 ●813X3 	Remove PALB2 test from Tier 2 code 81406 and add Tier 1 codes 813X1, 813X2, and 813X3 for these tests
15	Tier 2 to Tier 1 PIK3CA	<ul style="list-style-type: none"> ▲81404 ●8XX01 	Request to remove PIK3CA test from Tier 2 code 81404 and add Tier 1 code 8XX01 for this test.
16	allV4 Influenza Vaccine	●906X0	Add code 906X0 to report a new quadrivalent adjuvanted influenza vaccine
17	Neurofeedback and Biofeedback Services	<ul style="list-style-type: none"> ●909X1-●909X6 ●04X1T ●04X2T D90901 D90875 D90876 	Delete codes 90901, 90875, and 90876; add 6 codes to identify combined planned assessment and provision of biofeedback and neurofeedback services as well as time components for these services; and add 2 new Category III codes to identify neurofeedback by training with an algorithm and non-EEG Neurofeedback
18	Vestibular Evoked Myogenic Potential Testing	<ul style="list-style-type: none"> ●925X1 ●925X2 ●925X3 	Add codes 925X1, 925X2, 925X3 to report Vestibular Evoked Myogenic Potential Testing

Tab #	Name	Code #	Request-Description
19	Auditory Evoked Potentials	<ul style="list-style-type: none"> ●92X51 ●92X52 ●92X53 ●92X54 D92585 D98586 	Add codes 92X51, 92X52, 92X53, 92X54 to report Auditory Evoked Potentials and delete 92585, 98586
20	Cardiac Device Evaluation-Delete 93299	D93299	Delete code 93299 and all related references
21	Exercise Test for Bronchospasm	<ul style="list-style-type: none"> ●946X0 ▲94617 	Revise 94617 to include a semi-colon as a parent and add a new code to report exercise testing for bronchospasm without electrocardiographic recordings
22	Mobile Services	<ul style="list-style-type: none"> ●9XX01 ●9XX02 ●9XX03 	Add three codes to report lift team services to transfer or reposition high risk patients
23	Cat II-Diabetes Care	<ul style="list-style-type: none"> ●304XF ●305XF D3045F 	Add codes 304XF and 305XF to identify HbA1c control greater than 7.0% and less than 8.0% and greater than 8.0% and less than 9.0%; and delete code 3045F
24	Cat III-Cancer Stem Cell Cytotoxicity Assay	●0X10T	Add Category III 0X10T to describe analysis of chemotherapy effectiveness on cancer stem cells
25	Cat III Adipose Tissue Cellular Implant Procedures	<ul style="list-style-type: none"> ●05X3T ●05X4T 	Add two new Category III code 05X3T, 05X4T to report Autologous cellular implant from adipose tissue

Tab #	Name	Code #	Request-Description
26	Category III Sundown	0058T 0215T 0382T 0085T 0216T 0383T 0100T 0217T 0384T 0101T 0218T 0385T 0102T 0219T 0386T 0106T 0220T 0394T 0107T 0221T 0395T 0108T 0222T 0396T 0109T 0228T 0397T 0110T 0229T 0398T 0111T 0230T 0400T 0126T 0231T 0401T 0208T 0234T 0403T 0209T 0235T 0404T 0210T 0236T 0405T 0211T 0237T 0212T 0238T 0213T 0308T 0214T 0381T	Request to remove Category III codes that are scheduled for sundown in 2021
27	Cat III-Evacuation of Meibomian Glands	●05X0T	Add code 05X0T to report evacuation of meibomian glands using a combination of adjustable heat-delivered eyelid treatment devices and manual gland expression.
28	Cat III-Transcervical Fallopian Tube Occlusion	●05X1T ●05X2T	Add code 05X1T and 05X2T to report transcervical bilateral permanent fallopian tube occlusion and the separate introduction of saline for confirmation of occlusion via sonosalpingography

Tab #	Name	Code #	Request-Description
29	Cat III 0355T to Cat I-Colon Capsule Endoscopy	●91XX0 D0355T	Add code 91XX0 for colon capsule endoscopy and delete Category III code 0355T
30	Cat III 0466T-0468T to Cat I-Respiratory Sensor Electrode Services	●645X1 ●645X2 ●645X3 ●64568 ▲64569 ▲64570 D0466T D0467T D0468T	Delete Category III codes 0466T, 0467T, and 0468T, add codes 645X1, 645X2, 645X3; and revise codes 64568, 64569, and 64570 to include hypoglossal nerve in the list of nerve examples within the code descriptor
31	Code Set Maintenance	15156 21296 22865 24136 24152 24331 24802 24935 25370 25426 25915 25922 25924 25929 27111 27175 27286 30545 35005 35112 35188 35515 35516 35536 35563 35636 35645 35693 37145 37180 37788 43401 47371 47381 48400 50120 50125 50686 50920 50974 50976 51920	Annual review of low utilization service CPT codes for possible deletion at the May 2019 Panel meeting

Tab #	Name	Code #	Request-Description
		54135 61611 62115 62294 63191 63194 63197 64862 64876 64896 69718 77610	
32	Screening-Diagnostic Digital Support Services	▲81228 ▲81229	Revise codes 81228 and 81229 to be performed in a constitutional OR oncology setting
33	PE-Only Workgroup Recommendations	-----	AMA staff proposal to announce a potential change to cease using the standard CCA form for administrative proposals and instead use only the PA and other necessary documents for review
34	AMA Staff Proposal - Administrative CCAs	-----	
35	PLA Q1 Codes	-----	Add PLA codes for 2018 Q1 cycle as a consent calendar