April 19, 2012

via Electronic Mail
Marie Mindeman
Director CPT Coding and Regulatory Affairs
Division of CPT
American Medical Association
515 North State Street
Chicago, IL 60654

Re: Draft Criteria for Development and Evaluation of CPT Category I and Category III Codes

Dear Ms. Mindeman:

On behalf of the Advanced Medical Technology Association (AdvaMed), I would like to thank the American Medical Association (AMA) for providing an opportunity for stakeholder input on the draft criteria on development and evaluation of Category I and III codes. Solidifying the criteria for developing and evaluating these code requests will be instrumental in providing clarity on the process for all interested stakeholders. AdvaMed is including our comments below (as all of our comments cannot be populated into the form distributed by the AMA). Our comments are as follows:

Page 1:
There is a period missing at the end of the last sentence of the first paragraph.

Page 2:
AdvaMed recommends that in the second sentence of the first paragraph on page 1 under Requests to Update the CPT Nomenclature replacing the words “other organizations” with “other stakeholders”.

Page 3:
Bullet 2—AdvaMed recommends that the AMA: Either provide a link to the appropriate code set maintenance standards or that the AMA define the standards in this section

Bullet 3—AdvaMed recommends that the AMA delete the word “nor”, preceding “service”, and replace it with the word “or”.
Page 4:

*Bullet 1*—AdvaMed recommends that the bullet be re-written to state that “All devices and drugs required for performance of the procedure or service have received FDA approval or clearance if such approval or clearance is required.”

*Bullet 4*—AdvaMed recommends that the word *medical* should be replaced with the word *clinical*; the new bullet would read “The procedure or service is consistent with contemporary clinical practice.”

Page 5:

*Bullets 1-3*—AdvaMed recommends that the word *or* as it appears at the end of each bullet be in **BOLD** so that the reader understands that only one of these three bullets has to be satisfied in order to apply for a Category III code; the word *and* which follows the semi-colon in bullet 3 should also be in **BOLD** and **underlined** to bring attention to the fact that bullet 4 must be satisfied in order to apply for a category III code.

*Bullet 1*—AdvaMed recommends modifying the language of the existing bullet to include an option for support by “either the specialists who will use this procedure *or* at least one CPT or HCPAC advisor representing practitioners who would use this procedure or service”.

*General comments*—Hospitals are major users of CPT codes, especially for services provided in the hospital outpatient setting. Any changes to the coding nomenclature have the potential to impact hospitals and other providers. CPT applications should provide a method to identify codes used by hospitals to ensure that, as the code is being developed, the impact to hospitals can be appropriately considered.

*Conclusion*—AdvaMed appreciates your consideration of our comments and recommendations on this issue. We would be happy to address any questions or concerns. Should you have questions please contact DeChane Dorsey, Esq., at 202-434-7218 or ddorsey@advamed.org. Thank you and we look forward to your feedback.

Sincerely,

Ann-Marie Lynch
Executive Vice President
Payment and Health Care Delivery Policy