



CPT/RBRVS Assistance Industry Statement

August 2012

The American College of Cardiology (ACC) and the Heart Rhythm Society (HRS) typically coordinate efforts to address CPT (Common Procedural Terminology) coding and reimbursement issues relevant to cardiovascular medicine. This includes working closely with the AMA CPT Editorial Panel, the AMA/Specialty Society RBRVS Update Committee (RUC), the Centers for Medicare and Medicaid Services (CMS), and other third party payers as deemed appropriate.

On occasion, industry representatives have asked for the guidance or participation of our societies in order to establish new CPT codes or HCPCS (Healthcare Common Procedure Coding System) or modify existing codes. In addition, for some society-generated initiatives, open and direct communications with industry have helped create more granular code sets and facilitated data collection to support reimbursement recommendations for clinicians. The societies welcome the opportunity to engage with members and industry in addressing coding and reimbursement issues that impact upon our respective memberships, including issues involving established or proposed category I CPT codes and those involving development of category III CPT codes for emerging technologies. However, given the limited resources available to each society, active participation with all requests cannot be assured.

These guidelines have been developed to provide a framework for transparent, ethical engagement between the societies and industry, and to foster thoughtful and responsible decision making. Requirements for information transmission have also been developed to facilitate appropriate evaluation of all requests within each society's stated timeline.

1. **Communication with Societies**

- a. In order to comply with professional standards regarding lobbying activities, ACC and HRSI mandate that *all initial requests and subsequent communications* from members and/or industry are sent to our society liaisons (listed below) rather than to society physicians directly. The society liaisons will contact the society representatives and/or committees as appropriate per society guidelines.

2. **Requirements for Requests to Facilitate Coding and Reimbursement Issues Not Related to CPT Code**

- a. A brief executive summary detailing the specific request, the rationale for society involvement, reason for the request, relevant background information, and the objectives that are sought. This summary should be no longer than 3 pages. Copies and reprints of relevant literature should accompany the submission.
- b. If appropriate, a reference list of three practicing physicians who have extensive experience with the novel procedure or device with declaration of any conflicts of interest including but not limited to significant financial ties (>\$10,000 over past two years) or involvement with the company or with any research, venture capital or hedge fund having any advisory relationship with the company.
- c. In addition to a submitted formal written request, a teleconference or meeting may be requested at the requestor's expense. Contact *must* be made with any of the relevant society liaisons listed below to pursue this.
- d. Each society reserves the right to determine the timing for review of the request. A response should be expected no sooner than 75 days from the original request. Response time will be contingent upon the nature and circumstances specific to the request made as well as other demands upon the society.
- e. Societies may request additional information during the review process.

3. **Requirements for Requests to Facilitate Code Change Proposals for Category I or III CPT Codes**

- a. A packet of information must be received by the society (ies) **at least** 90 days before the scheduled deadline for CCP submission to the AMA CPT Editorial Panel. (The CPT calendar, including deadlines for proposal submission, can be found at, <http://www.ama-assn.org/ama/pub/physician-resources/solutions-managing-your-practice/coding-billing-insurance/cpt.page>) This packet should include the following:
 - i. A brief executive summary detailing the reason for the request, relevant background information, and the objectives that are sought. This summary should be no longer than 5 pages. Copies and reprints of relevant literature should accompany the submission.
 - ii. Fully completed draft CPT Code Change Proposal Request Form(s) including completed conflict of interest statements for the submitting

physician. Note: Financial interest greater than \$10,000 in fees, research support, advisory board service, honoraria, venture capital/hedge fund may disqualify the submitter from participating in the submission per the rules of the CPT Editorial Panel.

- iii. Additional information may be requested to assist the society reviewers.
- b. In addition to a submitted formal written request, a teleconference or meeting may be scheduled, at the requestor's expense. Contact *must* be made with any of the relevant society liaisons listed below to pursue this.
- c. Each of the societies reserves the right to determine the timing for review of the request. A response should be expected no sooner than 90 days from the original request. Response time will be contingent upon the nature and circumstances specific to the request made as well as other demands upon the society.
- d. Guidance provided by one or more societies should not be construed as endorsement of the proposal unless a society or societies agree to become co-submitters of the code change proposal.

Society Liaisons

American College of Cardiology (ACC)

Coding Issues

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Heart Rhythm Society (HRS)

Coding and Reimbursement Issues

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