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March 1, 2023

David Rice
The Centers for Medicare and Medicaid Services
Division of Outpatient Care
7500 Security Boulevard
Baltimore, MD 21244

Dear Mr. Rice,

The American College of Radiology (ACR), representing over 40,000 diagnostic, interventional radiologists, radiation oncologists, nuclear medicine physicians and medical physicists, appreciates the opportunity to submit comments regarding the placement of new and existing CPT codes for calendar year (CY) 2024 Hospital Outpatient Prospective Payment System.

The ACR would like to thank CMS for the opportunity to share ACR's recommendations for the placement of newly established category I CPT codes into appropriate APCs for CY2024. Below, we have outlined our recommendations.

Recommendation for Newly Established CPT code 2X000

CPT	Long Descriptor	Predecessor Code	ACR	ACR
Code			Proposed	Proposed
			APC	Payment
			Placement	Rate
2X000	Arthrodesis, sacroiliac joint, percutaneous, with image guidance, including placement of intra-articular implant(s) (eg, bone allograft[s], synthetic device[s]), without placement of transfixation device	0775T (Arthrd si jt prq iartic impl)	5116	\$21,897.63

For CY2024, category III CPT code 0775T will be replaced with category I CPT code 2X000 to report percutaneous SI joint fixation without the use of a transfixation device. Based on clinical similarity and resource use to the predecessor code, the ACR is recommending that code 2X000 is most appropriately placed in APC 5116 (Level 6 Musculoskeletal Procedures) with a payment rate of \$21,897.63 with a J1 status indicator. Predecessor code 0775T was placed in APC 5116 for CY 2023.

Recommendation for Newly Established CPT code 7X005

CPT Code	Long Descriptor	Predecessor Code	ACR Proposed APC Placement	ACR Proposed Payment Rate
7X005	Noninvasive estimate of coronary fractional flow reserve derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care professional	 0501T (Cor ffr derived cor cta data) 0502T (Cor ffr data prep & transmis) 0503T (Cor ffr alys gnrj ffr mdl) 0504T (Cor ffr data review i&r) 	5724	\$934.38

For CY2024, category III CPT codes 0501T-0504T will be replaced with category I CPT code 7X005 for analysis derived from augmentative software from a coronary computed tomography angiography data set for noninvasive fractional flow reserve. The ACR recommends that code 7X005 be placed in the same APC as the predecessor code 0503T which is APC 5724 (Level 4 Diagnostic Tests and Related Services) with a payment rate of \$934.38 and status indicator S. Code 0503T is the only code within this set that is reimbursed under OPPS, as it reports the analysis of fluid dynamics and simulated maximal coronary hyperemia, and generation of the estimated FFR model. The services described by the newly established code encompass all aspects of the activities described by the predecessor code set and should be reimbursed similarly, as the resource use and clinical homogeneity remain.

The ACR looks forward to continuing to work with CMS on issues relating to APC assignment for new and existing CPT codes. For any questions, please contact Kimberly Greck (kgreck@acr.org) or Christina Berry (cberry@acr.org).

Sincerely,

Andrew K. Moriarity, MD

Chair, ACR HOPPS/APC Committee

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CC:

Susan Janeczko, CMS Michael Booker MD, ACR Christina Berry, ACR Kimberly Greck, ACR