

CPT Code 97149 (five venoms) would be \$42.66 (\$21.26 + \$10.70 + \$10.70).

Comment: JCAAI also supplied pricing information for the multi-tine device that was requested in Table 1 of our proposed rule. As was suggested above, the commenters again proposed we average costs for high and low volume purchases, excluding bulk pricing, to obtain the price for each test.

Response: We appreciate the pricing information forwarded by JCAAI and selected a purchase quantity that is in the middle of the suggested range. For percutaneous allergy testing, CPT code 95004. This purchase quantity represents testing 200 typical patients, each receiving 40 tests. We have added this Multi-tine per test price, \$0.233, to the CPEP database for CPT codes 95004 and 95010.

Comment: The American Speech-Language-Hearing Association (ASHA) provided pricing information for the following items accompanied by the requested documentation: Aphasia assessment treatment forms—\$2.84 (for a diagnostic aphasia examination form and aphasia diagnostic profile), communication books/treatment notebook—\$1.50 and eartip insert—\$0.65 each or \$0.39 each (two sources). The American Academy of Otolaryngology—Head and Neck Surgery (AAO-HNS) submitted a price for the eartip insert of \$0.23 each and suggested that the communication books/treatment notebook be deleted. The (AAO-HNS) also submitted a price for cottonoids at \$0.875 each and for the phenol applicator kit at \$15.95 each.

Response: We will use the submitted price for the aphasia forms and will price the eartip insert at \$0.423, which is the average of the three prices submitted. The notebook, which is assigned to the speech-language therapy code, would be used over a course of treatment, and is not a disposable supply that is used or priced for a single service. Therefore, we will delete this item from our CPEP supply data. For the phenol applicator kit, we will use the price of \$15.152 per kit that represents an average price for a 6-kit and a 24-kit quantity purchase. Because these kits contain the phenol that is used in the procedures, phenol has been deleted as a separate supply from the 11 CPT codes that are assigned the kit. AAO-HNS used a 10-pack quantity to assign a price to each cottonoid, but we are using a 200-pack quantity that reflects the high usage of this item. Therefore, we are using \$0.773 as the price for each cottonoid.

Comment: Specialty societies representing radiation oncology and radiology disagreed that the fiducial screws used with the intensity modulated radiation therapy procedure should be deleted from the CPEP input supply list. The society argued that the screws are typically used for this procedure and that they are not separately billable.

Response: We will retain the fiducial screws in the list of supplies assigned to the intensity modulated radiation therapy procedure.

Comment: The American Society of Colon and Rectal Surgeons offered description changes for two services, CPT codes 46917 and 46924. The society recommended that the descriptor for the laser tip for both codes be changed to “laser tip, bare (single use)” at \$150. The commenter also requested that an ablation laser generator at \$59,890 be added to both codes and the existing laser, diode laser, and laser generator be deleted.

Response: A note from our contractor who is working on our repricing effort verified the above changes and we have revised our supply and equipment databases to reflect them.

Comment: The American Association of Orthopaedic Surgeons agreed with the proposed supply deletions listed in Table 1 of the proposed rule that are used in orthopaedic surgery. In addition, the association agreed with the concept of standardization of unit descriptions. However, the comment contends that the term “unit of use (uou)” is unclear and that we should consider alternative terms and abbreviations that would be more intuitive.

Response: The supply items in Table 1 that were listed for orthopaedic surgery are broach kit, hallux implant, sterile hand table drape, sterile cuff tourniquet, cephalosporin and sterile ankle tourniquet. As stated above, we will be deleting the broach kit and hallux implant and will also delete the hand table drape, cuff tourniquet and cephalosporin. As also noted above, we will retain the sterile ankle tourniquet in the supply database because the comment from the podiatry society argued that this item was not typically reused.

With regard to the comment on the use of “unit of use,” we selected the “unit of use” (uou) term to indicate any item that is packaged for single use, even if the item is not completely used up. This most often occurs with items that are packaged sterile. For example, “bacitracin (0.9gm uou)” refers to one

0.9gm foil package. The quantity entered would be 1 and not a smaller amount such as 0.3. Once this foil package is broken, it is considered “used up” and therefore the unit of use is 0.9gm. Specifically, any item with a “unit of use” designation is meant to be indicated in whole number “unit of use” quantities, not partials (e.g., entered as 1, 2, 3, etc., and not 0.5, 1.5, etc.).

Comment: A commenter representing sleep medicine stated that our proposed price of \$25 is significantly below prices for standard CPAP masks used in the polysomnography service, CPT code 95811. The commenter submitted prices from two manufacturers that average to \$88.

Response: It appears that the commenter has submitted prices for a reusable CPAP mask that would not be included in our CPEP data as a disposable supply. Therefore, we will price the disposable mask at \$25.135, as proposed.

Comment: We received a comment from the American Physical Therapy Association (APTA) that contended there is a rank order anomaly caused by the increased price for the electrode used for CPT code 97033, iontophoresis. APTA noted that the price of a “pair” of electrodes was \$16 in 2001 but has increased to \$23.98 under our current supply repricing initiative. APTA has asked that we review the proposed cost of this item as a means to moderate the rank order anomaly.

Response: We appreciate the comments offered by APTA and have reviewed the cost of the supplies assigned to the iontophoresis service. We determined that the electrodes for this service are packaged and priced as “kits” that contain the complete set of electrodes needed to provide one iontophoresis treatment. Therefore, only one electrode “kit” is needed for this code, as opposed to the two electrode “pairs” currently in our supply database. Consequently, we have changed the supply list for iontophoresis in our database to reflect that there is one kit, not two electrodes, at the proposed price of \$11.99. We believe that this should correct the rank order anomaly.

The following table, “Table 1 Items Needing Specialty Input,” lists those items on which we had requested specialty input, comments we received and the actions we are taking.