

*Final decision:* As a result of the statistical analysis of the 2003 multispecialty validation panel ratings, we have assigned 0.95 work RVUs to CPT code 17310.

**CPT Code 38204** *Management of recipient hematopoietic progenitor cell donor search and cell acquisition.*

We disagreed with the RUC recommendation of 2.00 work RVUs for CPT code 38204. We believed we are already making payment for any physician work associated with this service as part of our payment for other bone marrow transplant codes (that is, CPT codes 38205, 38206, 38240, 38241, and 38242) and have significant concerns about how this code would be used in actual practice. Therefore, we assigned CPT code 38204 a status indicator of "B," meaning that we will not make separate payment for this service.

*Comments:* Some commenters urged us to reconsider the RUC recommendation. In addition, the RUC submitted a comment disagreeing with our contention that the physician work associated with this code is included in other transplant codes. The RUC also asserted that discussions of this issue at the RUC meetings provided substantive information on how this code would be used.

*Response:* We continue to believe that the work of this service is contained in other transplant codes and are maintaining the status indicator of "B." Therefore, we will not make separate payment for this service.

**CPT Codes 43219** *Esophagoscopy, rigid or flexible; with insertion of plastic tube or stent*, **43256** *Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with transendoscopic stent placement (includes predilation)*, and **44383** *Ileoscopy, through stoma; with transendoscopic stent placement (includes predilation).*

As explained in the December 31, 2002 final rule, the work RVUs for these codes were revised by CMS to finalize outstanding issues related to the five-year review of the gastroenterology codes. For CPT code 43219, we maintained the work RVU of 2.80. Review of information supplied by specialty societies did not provide compelling evidence that the work RVUs should be changed. Based on a review of the physician time data and a comparison to other stent placement codes, we assigned 4.35 work RVUs to CPT code 43256 and 2.94 work RVUs to CPT code 44383, in order to place these

services in proper rank order to the other stent placement codes.

*Comment:* Some commenters felt that we improperly intervened in assigning work RVUs to these services albeit to correct rank order anomalies. Based on these comments we referred these codes to the multispecialty validation panel for review.

*Response:* As a result of the statistical analysis of the 2003 multispecialty validation panel ratings, we are retaining work RVUs of 2.80 for CPT code 43219, 4.35 for CPT code 43256 and 2.94 for CPT code 44383.

**CPT code 45335** *Sigmoidoscopy, flexible; with directed submucosal injections any substance.*

The RUC recommended work RVUs of 1.46 for CPT code 45335 based on a comparison to CPT code 45330, with incremental work RVUs added to reflect increased pre-, intra-, and post-service work. We disagreed with the RUC recommendation and compared this service to the analysis and recommendation provided by the RUC for CPT code 43201, which is also a new submucosal injection code. Based on the increased risk of complications (resulting in higher intra-service intensities) and the fact that several sites are being injected instead of one, we assigned a work RVU of 1.36 to CPT code 45335.

*Comment:* Some commenters expressed concern about the rejection of the RUC recommendation for this service and believed that we had misinterpreted the RUC findings.

*Response:* Upon further review and consideration of the RUC recommendation we will accept the RUC recommended work RVU of 1.46 for this service.

**CPT Code 45340** *Sigmoidoscopy, flexible; with dilation by balloon, each stricture.*

The RUC recommended a work RVU of 1.96 for this code, which includes 1.00 RVU for the incremental work based on the need for conscious sedation to perform this procedure. (Other flexible sigmoidoscopies do not require conscious sedation.) In the December 31, 2002 rule we stated that we did not believe it is appropriate to assign a work RVU for CPT code 45340 that is based on the presumption that a portion of the work value is for the provision of conscious sedation. Rather, we compared the RUC recommendations for work and physician time for other endoscopic dilation codes to the incremental times for CPT code 45340 and assigned a work RVU of 1.66 to CPT code 45340.

*Comment:* Some commenters urged us to accept the RUC recommendation,

noting that our characterization of RUC recommendations on conscious sedation was inaccurate. The commenters stated that the RUC has concluded that there is an increase in the amount of physician work relating to conscious sedation, but has been unable to identify a specific numerical value for that additional increment. The RUC is in the process of determining the universe of codes that include conscious sedation as an inherent part of the service provided by the operating physician to ensure these services are appropriately valued. Based on these comments we referred this code to the multispecialty validation panel for review.

*Response:* As a result of the statistical analysis of the 2003 multispecialty validation panel ratings, we have assigned 1.89 work RVUs to CPT code 45340.

**CPT Code 51798** *Measurement of post-voiding residual urine and/or bladder capacity by ultrasound, nonimaging.*

The RUC recommended 0.38 work RVUs based on a urology survey that reported that this procedure is performed 75 percent of the time by the physician and also based on a comparison of this procedure to CPT code 76857, *Ultrasound, pelvic (nonobstetric, B-scan and/or real time with image documentation; complete)*. We disagreed. This code is replacing a HCPCS level two code that was assigned 0.00 work RVUs because it is typically performed by a nurse or other clinical staff. We believed that CPT code 51798 is, therefore, also a nonphysician service and assigned 0.00 work RVUs to this service.

*Comment:* Some commenters requested that we reconsider our decision to assign 0.00 work RVUs to this service. The commenters argued that our reason for disagreeing with the RUC recommendation is based on a stated belief that there is no physician work involved, not on actual survey data as presented by the American Urological Association (AUA) and accepted by the RUC. Commenters urged that CMS work with AUA to review this decision or include this code as part of the multi-specialty validation panel for refinement of work RVUs. Based on these comments, we referred this code to the multispecialty validation panel for review.

*Response:* As a result of the statistical analysis of the 2003 multispecialty validation panel ratings, we will retain 0.00 work RVUs for CPT code 51798.

**CPT Codes 58545–58554** *Laparoscopic hysterectomy/myonectomy procedures.*