AMERICAN ACADEMY OF AUDIOLOGY

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AAA Guidance to Industry and Individuals on Creating and Revising CPT Codes

The Academy is willing to provide guidance to its members and others who are seeking to create or revise CPT Codes. In order to assist in providing this guidance, we ask that you complete this document as the first step in the process. This document includes a description of the AMA's criteria for codes, followed by a series of questions pertinent to your specific code proposal.

AMA Criteria for Category I and Category III Codes

All Category I or Category III code change applications must satisfy each of the following criteria:

- The proposed descriptor is unique, well-defined, and describes a procedure or service which is clearly identified and distinguished from existing procedures and services already in CPT;
- The descriptor structure, guidelines and instructions are consistent with current Editorial Panel standards for maintenance of the code set;
- The proposed descriptor for the procedure or service is neither a fragmentation of an existing procedure or service nor currently reportable as a complete service by one or more existing codes (with the exclusion of unlisted codes). However, procedures and services frequently performed together may require new or revised codes;
- The structure and content of the proposed code descriptor accurately reflects the procedure or service as typically performed. If always or frequently performed with one or more other procedures or services, the descriptor structure and content will reflect the typical combination or complete procedure or service;
- The descriptor for the procedure or service is not proposed as a means to report extraordinary circumstances related to the performance of a procedure or service already described in the CPT code set; and
- The procedure or service satisfies the category-specific criteria set forth below.

A proposal for a new or revised **Category I** code must satisfy all of the following criteria:

- All devices and drugs necessary for performance of the procedure or service have received FDA clearance or approval when such is required for performance of the procedure or service;
- The procedure or service is performed by many physicians or other qualified health care professionals across the United States;

- The procedure or service is performed with frequency consistent with the intended clinical use (i.e., a service for a common condition should have high volume, whereas a service commonly performed for a rare condition may have low volume);
- The procedure or service is consistent with current medical practice;
- The clinical efficacy of the procedure or service is documented in literature that meets the requirements set forth in the CPT code change application.

A proposal for a new or revised **Category III** code must satisfy all of the following criteria:

- The procedure or service is currently or recently performed in humans, **AND**

At least one of the following additional criteria has been met:

- The application is supported by at least one CPT or HCPAC advisor representing practitioners who would use this procedure or service; **OR**
- The actual or potential clinical efficacy of the specific procedure or service is supported by peer reviewed literature which is available in English for examination by the Editorial Panel; **OR**

There is:

a) at least one Institutional Review Board approved protocol of a study of the procedure or service being performed,
b) a description of a current and ongoing United States trial outlining the efficacy of the procedure or service, or other evidence of evolving clinical utilization.

Your Proposal

Identifying Information

Name:

Contact Information:

Are you a member of the Academy?

Are you an industry representative or consultant? If yes and it is related to this proposal, please disclose the name of the company/organization and your role.

Name and affiliation of any other consultants involved with this proposal.

FDA Approval

Does the procedure/service involve the use of a device that requires FDA approval?

Has the procedure/service received FDA clearance of approval?

Specific Rationale for this Proposal

What are the specific reasons that you believe this code change is necessary?

Proposed Code Name

What do you think would be an appropriate CPT descriptor for this code?

Current Codes Being Used

What codes are currently being used to describe this procedure/service?

Prevalence of Disorder Diagnosed or Treated

What is the prevalence of the disorder that the new procedure/service is designed to diagnose/treat?

Typical Provider of Service
Who typically provides this service?

Typical Site of Service
In what type of facility is the procedure/service typically performed?

Years the Service has been Provided
For how many years has the procedure/service been performed?

Other Specialties
Besides Audiology, what other specialties or subspecialties might perform the procedure/service?

Scope of Service

Are services performed widely across the U.S.?

Scope of Providers

Do many professionals provide the services/procedure?

Service Utilization

Do you have data available that provides national utilization of the service/procedure over a one-year period?

Available Guidelines

Are you aware of any available practice parameters/guidelines that describe this service/procedure?

Typical Patient

Please provide a clinical description of a typical patient who might receive this service/procedure, Including diagnosis and relevant conditions.

Description of Service

Please proved a brief summary description of what is actually done by the provider during the delivery of this service/procedure.

Publication Details and Attributes Grid

Here is a link to the literature criteria necessary for code submission: https://www.ama-assn.org/system/files/2020-06/category-I-III-literature-requirements.pdf

Does the proposed service/procedure have the necessary literature support?

Next Steps

Thank you for your efforts to answer these questions thoroughly.

You may forward a request to make presentations to staff representatives of the Academy. Depending on the nature of the request, a teleconference or meeting with the representatives may be scheduled.

All communications should be sent to **Denise Garris.**

Please do not contact Academy CPT Advisors directly to follow-up on the status of a request.
You must abide by the AMA's anti-lobbying policy regarding contacts with CPT Editorial Panel member and Specialty Society Advisors.