90 Years of Caring for Children—1930–2020

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Dear Medical Director:

On behalf of the American Academy of Pediatrics (AAP), a non-profit, professional organization of 67,000 primary care pediatricians, pediatric medical sub-specialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults, I write to request adequate payment for the new CPT 99072 code.

Effective September 8, 2020, CPT 99072 was created to report additional supplies, materials, and clinical staff time required for patient symptom checks over the phone and upon arrival, donning and removing personal protective equipment (PPE), and increased sanitation measures to prevent the spread of communicable disease.

Until the Centers for Medicare and Medicaid Services (CMS) publishes values on the Medicare Physician Fee Schedule, we request that you:

- Pay at 100% of billed charges until CMS values the code
- Avoid cost shifting expenses to patient responsibility

Once values have been released, we request that unpaid or denied claims retroactive to 9/8/20 be re-adjudicated for payment.

This new code covers the increase in practice expenses required to safely provide medical services to patients in person during a public health emergency (PHE). 99072 is for medical supplies and clinical staff time over and above those included in an office visit or other non-facility service. The definition for 99072 is:

99072 Additional supplies, materials, and preparation time required and provided by the physician or other qualified health care professional and/or clinical staff over and above those usually included in an office visit or other service(s), when performed during a nationally declared public health emergency due to respiratory transmitted infectious disease

Code 99072 is part of the HIPAA procedural code set effective 9/8/20, and HIPAA requires that covered entities utilize the code set that is valid at the time the service is provided.

The following table compares/contrasts code 99072 with existing code 99070 (Supplies and materials (except spectacles), provided by the physician or other qualified health care professional over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies, or materials provided)):

	99072	99070
When is the code reported?	 Only during a PHE Only for additional items required to support a safe in-person provision of evaluation, treatment, or procedural service(s) Can be reported with 99070 	- For additional supplies provided over and above those usually included with a specific service, such as drugs, intravenous (IV) catheters, or trays – when a more specific supply code (eg, HCPCS Level II) is not available - Can be reported with 99072
Are there limits to the number of times this code can be reported?	Yes reported only once per in-person patient encounter per provider identification number, regardless of the number of services rendered at that encounter.	No
Are there Place of Service (POS) restrictions?	Yes – this code can only be reported when the service is rendered in a non-facility POS setting, and in an area where it is required to mitigate the transmission of the respiratory disease for which the PHE was declared.	No
Is clinical staff time included?	Yes – this code accounts for the additional time required by clinical staff to provide the service safely.	No
What does this code cover?	 Time over what is included in the primary service of clinical staff time to conduct a pre-visit phone call to screen the patient, provide instructions on social distancing during the visit, check patients for symptoms upon arrival, apply and remove PPE, and perform additional cleaning of the room, equipment, and supplies Three surgical masks Cleaning supplies, including additional quantities of hand sanitizer and disinfecting wipes, sprays, and cleansers 	Additional supplies provided over and above those usually included with a specific service, such as drugs, intravenous (IV) catheters, or trays.

	99072	99070
Is this an add-on code?	No it does not have to be reported	No
	with an Evaluation and Management	
	(E/M) service. If it is reported with an	
	E/M service, 99072 is a separately	
	payable code and not bundled with the	
	E/M code.	
	It is appropriately reported with an in-	
	person patient encounter for an office	
	visit or other non-facility service (eg,	
	immunization administration) during a	
	PHE to prevent the spread of the	
	disease.	
Is the appropriate	No appropriate reporting of code	No
reporting of this code	99072 is not dependent on a specific	
diagnosis-specific?	patient diagnosis (eg, COVID-19).	

In closing, these are exceptionally challenging times for children and pediatricians and added expense required to keep everyone safe exacerbates an already difficult situation. Your assistance to meet the needs of children by properly paying for CPT code 99072 is a strong step forward to support the health needs of children and those who care for them.

We would welcome the opportunity to discuss this topic further. Please contact N'Gai Cobb, Senior Director, Health Care Financing Strategy at ncobb@aap.org with any questions.

Thank you very much.

Sincerely,

Sara H. Goza, MD, FAAP

Sara Loga MD, FAAP

President

SHG/ljw