

American Medical Association Terms & Conditions

Current Procedural Terminology (CPT)

The American Medical Association (AMA) has granted the Centers for Medicare & Medicaid Services (CMS or the agency) and its authorized agents a royalty-free license to use Current Procedural Terminology (CPT) in both print and electronic CMS publications, as an agency requirement. This license restricts the agency's use of CPT to Medicare, Medicaid, and other CMS administered programs. Any use not authorized is prohibited.

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Required Notice

If you use:

- CPT codes
- CPT codes and descriptions
- HCPCS Level I content (whether it's labeled HCPCS or CPT)

Use the Copyright Notice before the initial display of CPT content and then use the Copyright Statement on each succeeding page where CPT or HCPCS Level I content appears.

If you're using only HCPCS Level II codes, do not use the AMA copyright notice.

Copyright Year Guideline

The AMA copyright year is 1 year earlier than the year of the CPT codebook.

See [Copyright Notices](#) for specific year information.

Copyright Notice

CPT codes, descriptions and other data only are copyright (Insert appropriate year) American Medical Association. All Rights Reserved. Applicable FARS/HHSARS apply. Fee schedules, relative value units, conversion factors and/or related components aren't assigned by the AMA, aren't part of CPT, and the AMA isn't recommending their use. The AMA doesn't directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein.

Copyright Statement

CPT only copyright (Insert appropriate year) American Medical Association. All Rights Reserved.

Note: You may use the longer variant – "CPT codes, descriptions and other data only are copyright (Insert appropriate year) American Medical Association. All Rights Reserved."

Definitions

CMS user: CMS staff and or CMS authorized agent.

CMS end-user: The person using CMS developed electronic media and publications.

Publications whether printed, displayed on the web, or included in electronic media are defined as:

- Local Medical Review Policies (LMRPs)
- Bulletins and Newsletters
- Program Memoranda and Billing Instructions
- Coverage and Coding Policies
- Program Integrity Bulletins and Information
- Educational Training Materials, including Computer-Based Training Modules
- Special Mailings requiring expedited handling

- Fee Schedules including Ambulatory Surgical Center Payment Group

CPT Short Descriptions: The CPT five-digit identifying code numbers and abbreviated procedural descriptions that are no more than 28 characters long.

CPT Long Descriptions: The CPT five-digit identifying code numbers and procedural descriptions that include the complete procedural description.

Point-and-Click License: An agreement that appears on a computer screen or webpage and includes a computer software mechanism that requires the CMS end-user to accept the AMA license Terms and Conditions before gaining access to the CPT codes contained within the CMS publication. Preview the CMS-AMA End-User Point-and-Click License by using the [AMA Exhibit 2 – End-User Point and Click License Agreement](#).

Training Costs: The costs to reproduce materials for a training.

Terms & Conditions

1. CPT Usage Related to CMS Programs

This agreement authorizes use of CPT only for purposes related to participating in CMS programs. Unrelated usage containing CPT codes and descriptions requires a separate agreement with the AMA.

2. CPT Coding Advice

Publications referencing CPT codes shall convey Medicare or Medicaid specific information and not CPT coding advice. The CMS user shall not design publication substitutes for the CPT Book with respect to codes, long descriptions, notes, or guidelines.

3. Use of CPT Short Descriptions

The CMS user may include CPT short descriptions in publication.

4. Use of CPT Long Descriptions

30% Limitation Rule: The CMS user may use CPT long descriptions in a publication if the long descriptions do not exceed 30% of a section or 30% of a subsection's content. The 30% Limitation Rule doesn't apply if a CPT long description's subsection has less than 30 CPT codes. Two additional exemptions to the 30% Limitation Rule follow below.

5. Anesthesia, Evaluation and Management (E/M), and Pathology and Laboratory Subsection Exception to the 30% Limitation Rule

The 30% Limitation Rule doesn't apply to the Anesthesia, Evaluation and Management, and Pathology and Laboratory subsections. Also see the [AMA Exhibit 7 - Special Needs/Instructions for Evaluation and Management, Anesthesia, Surgery, Radiology, Pathology and Laboratory, and Medicine](#).

6. CPT Long Descriptions in an amount over the 30% Limitation Rule

Section or subsection headings may be in an amount over the 30% Limitation Rule in the following instances:

- CPT long descriptions are used in a narrative text necessary for the presentation of the information.
- CPT long descriptions aren't presented in consecutive listing, even if used in fee schedule or payment policy information.

View the [AMA Exhibit 4 – CPT Long Descriptions Usage](#).

7. Calculating the 30% Long Descriptions Limitation

For purposes of calculating the amount of "use" of CPT long descriptions, the CMS user shall evaluate each CMS publication or issue separately.

On an annual basis, the AMA agrees to provide counts (total and 30%) of the number of CPT codes included in the CPT Book sections and subsections to help CMS comply with this licensing agreement.

8. Waiver of the 30% Limitation Rule

The 30% Limitation Rule may be waived by the AMA in other circumstances. The AMA will review waiver requests on a case-by-case basis. The CMS user acknowledges the AMA requires CMS to submit a written waiver request when CMS' desired usage of the CPT codes extends beyond the 30% Limitation Rule.

9. Special Needs and Instructions for Evaluation and Management, Anesthesia, Surgery, Radiology, Pathology and Laboratory, and Medicine CPT sections

These sections contain unique special needs or instructions required to appropriately interpret and report the procedures and services contained in that section. The CMS user agrees to comply with the Special Needs and Instructions for these CPT sections as required under this license.

View the [AMA Exhibit 7 – Special Needs/Instructions for Evaluation and Management, Anesthesia, Surgery, Radiology, Pathology and Laboratory, and Medicine](#).

10. Use of CPT codes in Fee Schedules

Fee schedules may include CPT codes and CPT short descriptions. Fee schedules may **not** include CPT long descriptions. This CPT long description prohibition applies to, but isn't limited to, this list of Fee Schedules:

- Fee Schedules with listings of CPT codes
- Fee Schedules with listings of CPT short descriptions
- Fee Schedules with associated fees
- Fee Schedules without associated fees
- Fee Schedules with the annual new CPT codes and descriptions unless the subsection has less than 30 CPT codes

The CMS user shall abide by the above fee schedule conditions and shall not create a Fee Schedule designed to replace the CPT Book.

11. Sample Formats

The CMS user acknowledges this website provides access to examples displaying approved usage and formatting of CPT codes as agreed under this license. The sample formats will include copyright notices, separation of CPT and non-CPT by typography or text where practical, and separate listings of CPT when permitted.

View the [AMA CPT Exhibits Directory](#).

12. Required Copyright Notice

The CMS user shall post the following CPT copyright notice before the first appearance of any CPT information on a publication, computer screen, or webpage.

"CPT codes, descriptions and other data only are copyright (insert appropriate year) American Medical Association (or such other date of publication of CPT). All rights reserved. Applicable FARS/HHSARS apply."

13. Web End-User Point-and-Click License Agreement

The CMS user shall use a "Point-and-Click" License in the form of the [AMA Exhibit 2 – End User Point and Click License Agreement](#) for CMS publications containing CPT and posted on the web.

14. Placement of the CMS End-User Point-and-Click License Agreement

The End-User Point-and-Click License Agreement must appear before:

- Initial access is granted to any group of webpages containing CPT
- Any document that contains CPT
- Each file download containing all or any portion of CPT
- Any computer-based training modules that contain CPT

15. Required Statement following Point-and-Click License Agreement

The following statement shall also appear on the webpage where the actual publication appears after the CMS End-User Point-and-Click License:

"Note: Should you have landed here as a result of a search engine or other link, be advised that these files contain material that is copyrighted by the American Medical Association. You are forbidden to download the materials unless you read, agree to and abide by the provisions of the copyright statement. Read the AMA Copyright Notice now, then you will be linked back here."

AMA Copyright Notice

"CPT codes, descriptions and other data only are copyright (insert appropriate year) American Medical Association All Rights Reserved. Applicable FARS/HHSARS apply."

16. Required End-User Shrink-Wrap License Agreement

When a Point-and-Click License is impractical, the CMS user may use a Shrink-Wrap License with the same terms as contained in for electronic media containing CPT.

17. CMS may not charge fees

CMS may not charge fees for publications distributed over the web that contain 30% or more of a CPT's section or subsection.

Fee Exception: For training publications containing 30% or more of a CPT's section or subsection and distributed through Electronic Media, CMS may charge a fee not to exceed training costs.

18. Separate License Amendments

At present, CMS and the AMA have amended the CPT license in connection with the following CMS programs:

- QMIS Measures
- Physician Consortium for Performance Improvement (PCPI) Measures
- PQRI Measures
- ORDI Form and CPT Usage
- Provider Utilization and Payment Data Files
- EDGE Server Software System

If the CMS user works with 1 or more of the above programs, the user acknowledges each program has a Separate License Amendment. If you'll be working with content related to any of these programs, contact the CMS CPT_CPT_NUBC_Mailbox@cms.hhs.gov before posting anything.

19. CPT New Use Application

- CMS publications and guidelines that aren't related to Medicare programs, including the use of CPT into commercial products, will require a separate license agreement with the AMA.

- If your code usage is outside of an existing agreement, contact the association to discuss a new use agreement

20. CMS user's Acceptance of the AMA Terms and Conditions

If you're reviewing the above terms and conditions as a part of the AMA Point-and-Click Acceptance Agreement, use the close button to return to acceptance agreement. Next, select the accept button to generate an email with the hyperlink to the CPT electronic files.