

Assignment of CPT 0671T to APC 5492 for CY 2023

Advisory Panel on Hospital Outpatient Payment

August 22-23, 2022

CPT Code 0671T

- Current Procedural Terminology (CPT®)* code 0671T (Insertion of anterior segment aqueous drainage device into the trabecular meshwork, without external reservoir, and without concomitant cataract removal, one or more)
- Used to report trabecular bypass glaucoma procedures involving the insertion of devices, like the Glaukos iStent *inject*, which increases the outflow of ocular fluid and lowers intraocular pressure by creating a bypass through the trabecular meshwork, providing a direct channel between the anterior chamber and Schlemm's canal
- Trabecular bypass stent procedures are often performed together with a cataract surgery, but CPT code 0671T captures stand-alone procedures (i.e., without cataract extraction)
- Predominantly done in the ambulatory surgical center (ASC) setting

Description of the Issue

- The Centers for Medicare & Medicaid Services (CMS) proposes to assign CPT code 0671T to APC 5491 (Level 1 Intraocular Procedures) with a proposed hospital outpatient payment rate of \$2,201.12 and a proposed ASC payment rate of \$1,639.89
- CPT code 0191T (the predecessor code to CPT 0671T) was assigned to APC 5492
- CPT code 0449T a related bypass device code was assigned to APC 5492 with a similar geometric mean cost (geometric mean cost \$5,030.84)
- Cost statistics for 0191T without a cataract procedure show:
 - CY 2019: 77 single frequency claims; \$4,419.78 geometric mean cost
 - CY 2020: 99 single frequency claims; \$5,488.95 geometric mean cost
 - CY 2021 (first two quarters): 75 single frequency claims; \$5,138.19 geometric mean cost
- The proposed assignment to APC 5491 is inappropriately low based on the claims data

Recommendations and Rationale

- ***The Panel should recommend that CMS assign CPT code 0671T to APC 5492***
 - Claims data from Q1 and Q2, 2021 show a geometric mean for the predecessor code (0191T) of \$5,138.19 for single frequency claims
 - Of the geometric means for the Intraocular Procedures APC family, that \$5,138.19 figure is closest to the geometric mean of APC 5492 (\$4,100.54)
- If the suggested APC reassignment is not made, beneficiary access to a stand-alone MIGS procedure will be jeopardized because of the insufficiency of the payment level in light of the resources utilized in performing the procedure, especially in the ASC setting