



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

December 22, 2022

Chiquita Brooks-LaSure
Administrator, Centers for Medicare & Medicaid Services
Department of Health and Human Services
Box 8016, Baltimore, MD 21244-8016

RE: Potentially misvalued code, CPT 59200

Dear Administrator Brooks-LaSure:

The American College of Obstetricians and Gynecologists (ACOG), representing more than 60,000 physicians and partners in women's health, works to ensure that persons seeking obstetric-gynecologic care have comprehensive access to necessary services. In our annual review of CPT codes utilized by our members it has come to our attention that CPT code 59200, *Insertion of cervical dilator (eg, laminaria, prostaglandin) (separate procedure)*, may not accurately reflect the current practice expenses. Therefore, **ACOG is requesting that CPT 59200 is included in the 2024 Proposed Medicare Physician Fee Schedule as a potentially misvalued service.**

Clinical Use

The insertion of a cervical dilator is noted in practice guidelines and utilized in several obstetric-gynecologic procedures that require the cervix to be opened, including but not limited to vaginal deliveries, spontaneous and induced abortions, and vaginal surgical procedures. Osmotic cervical dilators are natural or synthetic dilators, with synthetic dilators found to be more effective with quicker action than the natural-based ones.^{1,2} A retrospective study further noted that dilation with synthetic dilators were less likely to cause leukocytosis.³ There are several studies that compare the effectiveness of synthetic dilators with other methods of dilation, overall finding the synthetic dilators to provide consistent, reliable results with high patient satisfaction.^{4,5,6}

Misvalue concerns

While utilization for CPT 59200 is low in the Medicare program (192 claims in 2021), T-MSIS Analytic File (TAF) Claims data (2019-2020) show over 1.3 million claims for 59200, an overwhelming majority related to pregnancy or delivery care for Medicaid beneficiaries. A review of Medicaid fee schedules demonstrates that the reimbursement for CPT 59200 is

typically less than the current practice expense of \$72.09, which includes the Laminaria tent as the dilator. Laminaria is a natural osmotic cervical dilator and, as previously noted, has been found to be less effective than synthetic osmotic cervical dilators. Additionally, is it the least expensive osmotic dilator on the market, which significantly limits care options for Medicaid beneficiaries. Decades of research confirm that inadequate reimbursement in the Medicaid program has implications for patient access to care and that changing financial incentives for physicians can play an important role in mitigating these issues and improving health outcomes.^{7,8,9,10} Despite inadequate payment, obstetrician-gynecologists consistently accept new Medicaid patients at higher rates than physicians overall.¹¹ With an increasing maternal mortality rate, rates for non-Hispanic Black women significantly higher than rates for non-Hispanic White and Hispanic women, and the anticipated increase in maternal mortality following the *Dobbs v Jackson* Supreme Court decision, it is imperative to close any gaps in health equity.¹² Minimally, CPT codes must be valued to cover the cost of care.

As such, ACOG requests that CMS include CPT 59200 as a potentially misvalued service so that an evaluation of the typical supply cost may be performed.

Thank you for consideration of our recommendations. For any questions or to schedule a meeting to discuss this and other issues related to the Medicare Physician Fee Schedule, feel free to reach out to Erin Lambie Alston, Manager, Health Policy, at elambie@acog.org.

Sincerely,



Lisa Satterfield, MS, MPH, CAE, CPH
Senior Director, Health Economics & Practice Management

¹ Chambers DG, Willcourt RJ, Laver AR, Baird JK, Herbert WY. Comparison of Dilapan-S and laminaria for cervical priming before surgical pregnancy termination at 17-22 weeks' gestation. *Int J Womens Health*. 2011;3:347-52. doi: 10.2147/IJWH.S25551. Epub 2011 Oct 20. PMID: 22114527; PMCID: PMC3220316.

² Newmann SJ, Sokoloff A, Tharyil M, Illangasekare T, Steinauer JE, Drey EA (2014) Same-day synthetic osmotic dilators compared with overnight laminaria before abortion at 14–18 weeks of gestation: a randomized controlled trial. *Obstet Gynecol* 123(2 Pt1):271–278. doi:10.1097/aog.0000000000000080

³ Benson LS, Stevens J, Micks EA, Prager SW. Leukocytosis during cervical preparation with osmotic dilators for dilation and evacuation. *SAGE Open Med*. 2021 Jan 12;9:2050312120986731. doi: 10.1177/2050312120986731. PMID: 33489232; PMCID: PMC7809630.

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- ⁴ Lisa D. Levine, Catalina M. Valencia, Jorge E. Tolosa, Induction of labor in continuing pregnancies, *Best Practice & Research Clinical Obstetrics & Gynaecology*, Volume 67, 2020, Pages 90-99, ISSN 1521-6934, <https://doi.org/10.1016/j.bpobgyn.2020.04.004>.
- ⁵ Gupta J, Chodankar R, Baev O, Bahlmann F, Brega E, Gala A, Hellmeyer L, Hruban L, Maier J, Mehta P, Murthy A, Ritter M, Saad A, Shmakov R, Suneja A, Zahumensky J, Gdovinova D. Synthetic osmotic dilators in the induction of labour-An international multicentre observational study. *Eur J Obstet Gynecol Reprod Biol*. 2018 Oct;229:70-75. doi: 10.1016/j.ejogrb.2018.08.004. Epub 2018 Aug 3. PMID: 30107363.
- ⁶ Saad AF, Villarreal J, Eid J, Spencer N, Ellis V, Hankins GD, Saade GR. A randomized controlled trial of Dilapan-S vs Foley balloon for preinduction cervical ripening (DILAFOL trial). *Am J Obstet Gynecol*. 2019 Mar;220(3):275.e1-275.e9. doi: 10.1016/j.ajog.2019.01.008. Epub 2019 Feb 18. PMID: 30790569.
- ⁷ Alexander D, Schnell M. The Impacts of Physician Payments on Patient Access, Use, and Health. *NBER* working paper 26095. July 2019. DOI 10.3386/w26095
- ⁸ Oostrom T, Einav L, Finklestein A. Outpatient Office Wait Times And Quality Of Care For Medicaid Patients. *Health Affairs*. 2017;36(5): 826-832.
- ⁹ White C. A Comparison of Two Approaches to Increasing Access to Care: Expanding Coverage versus Increasing Physician Fees. *Health Serv Res*. 2012;47(3): 963-983.
- ¹⁰ Recent research has also found that billing and other administrative obstacles are a deterrent to physician participation in the Medicaid program. See Dunn A, Gottlieb JD, Shapiro A, Sonnenstuhl DJ, Tebaldi P. A Denial a Day Keeps the Doctor Away. *NBER* working paper 29010. July 2021. DOI 10.3386/w29010
- ¹¹ "Physician Acceptance Of New Medicaid Patients: What Matters And What Doesn't, " *Health Affairs Blog*, April 10, 2019. DOI: 10.1377/hblog20190401.678690
- ¹² Hoyert DL. Maternal mortality rates in the United States, 2020. *NCHS Health E-Stats*. 2022. DOI: <https://dx.doi.org/10.15620/cdc:113967>