

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

| | |
|--------------------|-----------------------|
| TO <i>Supra</i> | DATE <i>4-4-13</i> |
|--------------------|-----------------------|

| DIRECTOR'S USE ONLY | ACTION REQUESTED |
|---|--|
| 1. LOG NUMBER <i>000317</i> | <input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ |
| 2. DATE SIGNED BY DIRECTOR <i>CC: Mr. Keck Cleared 4/12/13, letter attached.</i> | <input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>4-16-13</i> |
| | <input type="checkbox"/> FOIA DATE DUE _____ |
| | <input type="checkbox"/> Necessary Action |

| APPROVALS (Only when prepared for director's signature) | APPROVE | * DISAPPROVE (Note reason for disapproval and return to preparer.) | COMMENT |
|--|---------|---|---------|
| 1. | | | |
| 2. | |  | |
| 3. | | | |
| 4. | | | |



John

Fred T. Garner, MD

200 Arbor Lake Dr., Suite 120, Columbia, SC 29223

April 2, 2013

Nancy Sharpe, Program Director
Claims Operations & Provider Relations
SC Department of Health & Human Services
PO Box 8206
Columbia, SC 29202

RECEIVED

APR 04 2013

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: New Pediatric Polysomnography FEE Schedule – 95782 & 95783

Dear Ms. Sharpe:

Please accept my gratitude for your timely response in acknowledgement of the new CPT codes 95782 and 95783 for Pediatric Polysomnography procedures.

As a reminder, I am the Medical Director and principal for a pediatric sleep program within my practice, ENT for Kids, LLC. I have developed a pediatric sleep program in alignment with the American Academy of Sleep Medicine (AASM) standards to assure quality care to our patients. Our program is set up to attain all professional, clinical, and technical standards and to implement all diagnostic, therapeutic, emergency and quality assurance methods as required. The determination of these new CPT codes is necessary to proceed in our mission and will allow us continued care of the pediatric patients under six years of age.

Please know I am committed to our state Medicaid program. As an active ENT, sub-specialty physician, surgeon and pediatric sleep specialist board certified by the AASM, my practice is primarily dedicated to the care of children insured by SC Medicaid. The percentage of patients in my practice whom are insured as South Carolina Medicaid beneficiaries is greater than 70% and growing.

I am concerned with the new global rates assigned to CPT codes 95782 and 95783. The new global rates provide no beneficial change over the current comparable CPT codes 95810 and 95811. The industry, which includes CMS, has recognized that the new codes support a minimum 50% increase over the current rates. These assigned fees were not created unexpectedly. Many of the children I see in my practice under the age of six are often diagnosed as special needs patients, with comprehensive medical treatment requirements, and physical and emotional issues that require more extensive management and care.

The AASM has provided standards of testing and scoring rules for the acquisition of polysomnography for Pediatric sleep medicine. Pediatric sleep testing requires additional auxiliary equipment and extended monitoring. For example, the AASM is recommending Capnography, which is the continued monitoring of End Tidal CO₂ (ETCO₂) measures and determines the quantitative index for evaluating adequacy of ventilation of these young patients. The AASM is also requiring the new CPT codes for children under the age of 6 to extend the polysomnogram to a minimum of 7 hours of recording time. And, since approximately 50% of the patients we test in our sleep center are under the age of 6, a large number of our test procedures will fall under the new codes and requirements.



Fred T. Garner, MD

200 Arbor Lake Dr., Suite 120, Columbia, SC 29223

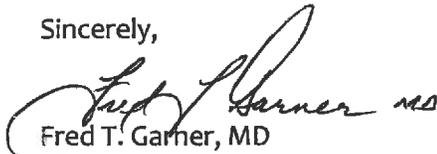
The new CPT codes carry global RVU values of 31.35 (95782) and 32.83 (95783) which are increases of 70% and greater per code, over the current CPT codes for polysomnography 95810 and 95811 for ages 6 and older.

These increases address the greater complexity and time required to perform these pediatric studies. I have taken the time to provide some of the increases we are seeing with other carriers. Attached is a list of our carrier mix and their rate adjustments for these new codes (see attachment *).

With this knowledge, we request a review to adjust the assigned fee for polysomnography CPT codes 95782 & 95783 for our sleep program, concurring with the rate changes implemented within our industry.

I hope you see the value in our commitment to SC Medicaid beneficiaries and our continued desire to make a difference with the care of these children.

Sincerely,


Fred T. Garner, MD

Cc: Anthony Keck, Director

*Enclosure

**Polysomnography Fee Schedule
(Fred T. Garner, MD – Pediatric Sub-Specialty)**

| Carrier | Plan | NEW CODES | |
|--|------------|---|-----------------------------------|
| | | 95782 Diagnostic PSG (Under 6yrs) | 95783 CPAP PSG (Under 6yrs) |
| BC/BS | BC/BS | \$900.00 | \$900.00 |
| BC/BS | State | \$1326.86 | \$1326.86 |
| BC/BS | Federal | \$900.00 | \$900.00 |
| BC/BS | BlueChoice | \$900.00 | \$900.00 |
| United Healthcare | | \$993.26 | \$1059.96 |
| Cigna | | 50% of U&C | 50% of U&C |
| SuperMed | | \$904.48 | \$965.30 |
| Select Health / First Choice | | N/A | N/A |
| BlueChoice MCD | | N/A | N/A |
| SC Medicaid | | N/A | \$870.23 |
| Medicare (CMS) | | \$954.29 | \$1018.49 |
| MedCost | | N/A | N/A |
| TriCare | | \$972.07 | \$1017.85 |
| PAI | | \$900.00 | \$900.00 |
| | | | |
| RVU Values are (source AASM Coding & Compliance): | | 31.35 | 32.83 |

RVU Values for:

95810 = 17.54 & 95811 = 19.32

Frank T. Gorman, MD
200 Arthur Ashe Dr
Suite 120
Columbia, SC 29223

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Department of Health & Human Services
OFFICE OF THE DIRECTOR

Anthony Koel, Director
Office of Medical Services
PO Box 8206
Columbia, SC 29101-8206

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April 12, 2013

Frederick T. Garner, MD
200 Arbor Lake Drive, Suite 120
Columbia, SC 29223

Dear Dr. Garner:

Thank you for your letter regarding appropriate reimbursement for Pediatric Polysomnography procedures. We appreciate this opportunity to be of assistance.

The Pediatric Polysomnography, Current Procedural Terminology Codes (CPT) 95782 and 95783 are new codes for 2013. It was noted that Medicare did not price these codes prior to the January 1, 2013 new code update and therefore, we relied on other methodologies in order to reimburse for these services beginning January 1, 2013. Because, Medicare has now posted the new pricing for these procedures and they are part of the 2013 annual code update we will adjust our records to reflect this change.

The new rates for a Pediatric Sub-Specialists are:

| CPT Code | Modifier | Price |
|----------|----------|----------|
| 95782 | 00 | \$692.57 |
| 95782 | TC | \$606.62 |
| 95782 | 26 | \$85.95 |
| 95783 | 00 | \$710.24 |
| 95783 | TC | \$618.55 |
| 95783 | 26 | \$91.69 |

Our online fee schedule will be updated to reflect the new rates associated with these codes on May 1, 2013.

We greatly appreciate your continued support of the South Carolina Medicaid program as we all strive to provide the best healthcare to the citizens of the State. If you have any questions or concerns please contact me at 803-898-2828.

Sincerely,

Nancy Sharpe, Program Director
Claims Operations & Provider Relations

NS/r

cc. Mr. Tony Keck
Mr. John Supra