

June 2, 2020

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RE: Payments for Three-Dimensional Conformal Radiation Therapy Planning Services

Dear Dr. Kettler:

The American Society for Radiation Oncology (ASTRO)¹ is concerned by reports that Wisconsin Physician Services (WPS) is denying payment for certain radiation therapy services based upon inaccurate information. Practices report denials of claims containing Three-Dimensional Radiotherapy Plan (CPT 77295), Simulation-aided field setting codes (77280-77290), and Continuing medical physics consultation (CPT 77336). We urge WPS to cease inappropriate denials and remit payment for these claims.

Practices were informed that these denials are based upon procedure to procedure (PTP) edits that include services for image guidance, simulation, and isodose planning billed within 14 days of CPT code 77295. ASTRO believes that these inappropriate denials are due to an Office of the Inspector General (OIG) report, *Medicare Could Have Saved Millions of Dollars in Payments for Three-Dimensional Conformal Radiation Therapy Planning Services*. The OIG intended to determine possible savings to Medicare if billing requirements for CPT code 77301 Intensity Modulated Radiation Therapy (IMRT) Treatment Planning were applied to CPT code 77295 Three-Dimensional Radiotherapy Plan; however, this premise does not recognize the distinct differences in the process of care associated with CPT codes 77295 and 77301. The report makes inappropriate conclusions based on inaccurate information regarding the building blocks associated with the valuation of CPT code 77295, as well as the application of NCCI edits for services associated with the delivery of three-dimensional radiotherapy planning. The OIG identified medically necessary services that are included in the valuation of 77301 but are not included in the valuation of 77295, and then identified “savings” if these services were not paid separately and still not included in the valuation of 77295. These postulated “savings” are nothing more than a tally of payments that could be withheld from providers for medically necessary services to beneficiaries.

The OIG matched payment for CPT code 77295 with individual radiation therapy planning services listed in the National Coding Correct Initiative (NCCI) procedure to procedure (PTP) edits, including services for image guidance, simulation, and isodose planning, billed up to 14 days before CPT code 77295. The

¹ ASTRO members are medical professionals, who practice at hospitals and cancer treatment centers in the United States and around the globe and make up the radiation therapy treatment teams that are critical in the fight against cancer. These teams often include radiation oncologists, medical physicists, medical dosimetrists, radiation therapists, oncology nurses, nutritionists and social workers, and treat more than one million cancer patients each year. We believe this multi-disciplinary membership makes us uniquely qualified to provide input on the inherently complex issues related to Medicare payment policy and coding for radiation oncology services.

report fails to note that PTP edits take effect if a provider reports two codes of an edit pair for the same beneficiary on the *same date of service*. There are many reasons why these services are billed on a different date of service prior to a Three-Dimensional Radiotherapy Plan. For instance, an additional CT simulation may be performed to assess the compatibility of the treatment field arrangement with the linear accelerator geometry or other verification or localization purpose.

Continuing Medical Physics Consultation (77336) is a medically necessary service that is associated with the treatment delivery process and not with 77295. It can only be reported during treatment delivery, which occurs after the completion of the 77295 procedure.

These essential actions occur once treatment delivery is underway. If this work is not performed, and appropriate modifications to the treatment regime are not instituted, the patient may be seriously harmed because of the irreversible nature of radiation treatment delivery. **ASTRO urges WPS to consider medical necessity and reimburse providers for Simulation and Continuing Medical Physics Consultation services that are essential to patient safety.**

Thank you for your consideration of our comments. Should you have any questions or wish to discuss our recommendations further, please contact Jessica Adams, Health Policy Analyst (703) 839-7396 or via email at Jessica.adams@astro.org.

Sincerely,



Laura I. Thevenot
Chief Executive Officer

CC: Center for Medicare and Medicaid Services

Enclosed: March 25, 2019 Letter to OIG