Paul R. Rao, PhD, CCC, CPHQ, FACHE
American Speech-Language-Hearing Association
2200 Research Boulevard
Rockville, MD 20850-3289

Dear Dr. Rao:

Thank you for your letter regarding the physician supervision requirement for videostroboscopy (Current Procedural Terminology (CPT) procedure code 31579) and nasopharyngoscopy (CPT procedure code 92511). The Centers for Medicare & Medicaid Services (CMS) greatly appreciates your bringing these concerns to our attention.

The procedure codes that are of concern in your letter are primarily diagnostic tests. For diagnostic tests paid under the Medicare physician fee schedule, CMS assigns a minimum level of required physician supervision (general, direct, or personal – each with an increasingly closer level of supervision of the performance of the procedure). As procedure codes 31578 and 92511 are diagnostic tests, CMS believed these codes needed to have a supervision level assigned to them.

Upon further review, we recognized that while physicians perform these diagnostic procedures, speech pathologists also do them to evaluate and treat a patient’s functional/use problems. For this reason, we have removed the supervision level for these codes in our October 1, 2011 quarterly update to the physician fee schedule database.

I appreciate your interest in this issue as we work towards our mutual goal of strengthening the Medicare program for all beneficiaries. A similar response will be sent to Dr. J. Regan Thomas.

Sincerely,

Christina Smith Ritter, PhD
Director, Division of Practitioner Services
Hospital & Ambulatory Policy Group
Center for Medicare