

Important CPT® Code Update

For over two years, NSGC, in collaboration with the American College of Medical Genetics and Genomics (ACMG), has been working within the AMA CPT® and RUC processes to modernize the CPT® code for genetic counseling by genetic counselors in an effort to improve reimbursement for our members' professional time and services.

NSGC is happy to announce a step forward in the CPT® code modernization process. On July 10, the Centers for Medicare and Medicaid Services (CMS) released their calendar year **2025 Medicare Physician Fee Schedule (MPFS) and Quality Payment Program (QPP) proposed rule**. The following is an explanation of the published proposed rule that applies to the modernized code, as well as a call to action for members.

NSGC can now report that in September 2023, the American Medical Association's (AMA) CPT® Editorial Panel introduced a replacement CPT® code for 96040 (Medical genetics and genetic counseling services, each 30 minutes face-to-face with patient/family) which has a current placeholder name of 9X100 and a new definition (Medical genetics and genetic counseling services, each 30 minutes of total time provided by the genetic counselor on the date of the encounter). The actual code number and final code description will be published by AMA and announced in September 2024. The changes will be effective January 1, 2025. The new code is a positive development for how genetic counseling services are to be reported and reimbursed. One of the most exciting updates to the proposed code appears to be the change from "face to face" time that is currently accounted for by the CPT® code 96040, to "total time provided by the genetic counselor on the date of the encounter" that will be billable with the new code.

Important notes applicable to this discussion are:

- The proposed rule will not impact CMS provider status of genetic counselors. Recognition of genetic counselors as providers is a separate and important [advocacy initiative](#).
- NSGC anticipates the new code will be used by commercial payors.
- Due to AMA confidentiality requirements, NSGC and the volunteers working on this effort have been prohibited from providing details about this change. The publication of the proposed rule allows NSGC to provide some information, which we wanted to push to our membership as soon as possible. Currently, NSGC can only provide information to our members that is reflected in the proposed rule.
- The code, 9X100, is a placeholder name until a formal number is assigned this fall. The final code number and full code descriptor are expected to be published by the AMA in September.

CMS has stated the following in the proposed rule for the new CPT® code 9X100:

"The service is provided by a genetic counselor; therefore, we considered assigning Procedure Status "X" to CPT code 9X100. Because the PE RVUs would not display for the code with that assignment and that may impact access to the service with other payors, we are instead proposing bundled status (Procedure Status "B") for CPT code 9X100 to maintain the status of predecessor CPT code 96040, and we are seeking feedback from interested parties regarding the appropriate procedure status for this code. CPT guidelines for CPT code 9X100 state that a physician or other qualified healthcare professional (QHP) who may report evaluation and management services would not be able to report CPT code 9X100. Instead, these physicians and QHPs would use the appropriate evaluation and management code."

NSGC, in collaboration with ACMG, will be providing comments in support of CMS listing the code as a "B" code as that will allow for the RVUs to be published, aiding payors in setting rates. This is important because the "B" code status will allow reporting and payment for genetic counseling services to be consistent with the care provided. CMS does not report or publish relative value figures on X codes but can do so with B codes. This transparency is vital to the strategy for engaging commercial payors.

NSGC will provide members with our comments to CMS tied to this proposed code change, along with draft comments for our members to personalize and the link to submit comments in August. Comments to CMS are due by 5 PM on September 9, 2024.

Rest assured that NSGC staff and volunteers have been working diligently to support our members during this CPT® transition. Improving genetic counselor reimbursement requires that each individual GC providing clinical services feels informed and empowered to engage with their employers and local payors on billing, coding and reimbursement practices. NSGC member resources will include an upcoming *Perspectives* article, a session at the Annual Conference, a CPT® FAQ document and toolkit, and a webinar. The new proposed CPT® code will provide an important opportunity to 1) better conceptualize current billing and reimbursement practices at your individual institutions; 2) ensure those institutions and payors are prepared for this change in CPT® code in 2025.

A great deal more work is set to commence once the AMA publishes the final code set this fall, at which point members can expect further clarity on the impact this improvement will have on billing and reimbursement of services. NSGC will be engaging national and regional payors to educate them about the new code, and leveraging the opportunity to highlight where improvements can be made around payor credentialing and improved coverage of genetic counseling by genetic counselors. Stay tuned!

The entire notice of proposed rulemaking can be found here:
<https://public-inspection.federalregister.gov/2024-14828.pdf>

The NSGC Board of Directors would like to thank our volunteers, staff, and colleagues at the ACMG for all of their work and collaboration on this exciting modernization of the genetic counselor service documentation and reporting.

Sent on behalf of the NSGC Board of Directors, NSGC CPT® Workgroup, and NSGC Access and Service Delivery Committee

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