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January 4, 2016

Dear Medical Director:

The American Academy of Pediatrics (AAP), representing over 64,000 pediatricians, pediatric medical sub-specialists and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents and young adults, is advocating for coverage and payment for new CPT codes that are effective January 1, 2016.

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Since the Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that the “version of the medical data code sets specified in the implementation specifications must be the version that is valid at the time the health care is furnished,” covered entities must incorporate the new codes into their claims processing systems by January 1, 2016. We want to inform you of these new codes and ascertain how your claims systems and payment edits will pay on claims reporting the following codes:

#### Removal of Impacted Cerumen

A new code, 69209, (*Removal of impacted cerumen using irrigation/lavage, unilateral*) has been added for reporting the practice expense of removing impacted cerumen without instrumentation. This code will not be reported for removal of non-impacted cerumen nor for removal of impacted cerumen requiring instrumentation (that is reported with CPT code 69210). Code 69209 will not be reported in conjunction with code 69210 when performed on the same ear. Either CPT code 69209 and 69210 is reported for a unilateral service and modifier 50 (bilateral procedure) is appended when the service is performed bilaterally. Removal of cerumen that is not impacted is included in the E/M code regardless of how it was removed.

#### Instrument-Based Ocular Screening

A change was made to revise CPT code **99174** to specify instrument-based ocular screening (eg., photoscreening, automated-refraction), with remote analysis and report. A new CPT code **99177** has been added to report instrument-based ocular screening with on-site analysis (pass/fail indicator).

The Academy encourages you to provide coverage benefits and pay appropriately for these new codes as separately reported services, apart from the evaluation and management service.

We look forward to your response on your coverage and payment policy for these new CPT codes. If you have questions or need additional information, please contact Lou Terranova, Senior Health Policy Analyst at [lterranova@aap.org](mailto:lterranova@aap.org) or 847-434-7633.

Sincerely,

/s/

Bernard P. Dreyer, MD, FAAP  
President

BPD/lt