

Baseline Cytogenetic Testing Performed on Bone Marrow

Coding Specifications

Codes required to document patient has myelodysplastic syndrome (MDS) or acute leukemia and a visit occurred:

An ICD-9-CM diagnosis code for MDS or acute leukemia and a CPT code are required to identify patients to be included in this measure.

All measure specific coding should be reported on the claim(s) representing the eligible encounter.

MDS or acute leukemia ICD-9-CM diagnosis codes

- 204.00, 204.02, 205.00, 205.02, 206.00, 206.02, 207.00, 207.02, 207.20, 207.22, 208.00, 208.02 (leukemia)
- 238.72, 238.73, 238.74, 238.75 (myelodysplastic syndrome)

AND

CPT codes

- 99201, 99202, 99203, 99204, 99205
- 99212, 99213, 99214, 99215

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- **CPT II 3155F:** Cytogenetic testing performed on bone marrow at time of diagnosis or prior to initiating treatment
- **CPT II 3155F-1P:** Documentation of medical reason(s) for not performing baseline cytogenetic testing on bone marrow (eg, no liquid bone marrow or fibrotic marrow)
- **CPT II 3155F-2P:** Documentation of patient reason(s) for not performing baseline cytogenetic testing on bone marrow (eg, at time of diagnosis receiving palliative care or not receiving treatment as defined above)
- **CPT II 3155F-3P:** Documentation of system reason(s) for not performing baseline cytogenetic testing on bone marrow (eg, patient previously treated by another physician at the time cytogenetic testing performed)
- **CPT II 3155F-8P:** Cytogenetic testing not performed on bone marrow at time of diagnosis or prior to initiating treatment, reason not otherwise specified

These Physician Performance Measures (Measures) are not clinical guidelines and do not establish a standard of medical care, and have not been tested for all potential applications.

The Measures, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, e.g., use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the Measures for commercial gain, or incorporation of the Measures into a product or service that is sold, licensed or distributed for commercial gain. Commercial uses of the Measures require a license agreement between the user and the American Medical Association (AMA), [on behalf of the Physician Consortium for Performance Improvement® (Consortium)] or the American Society of Hematology (ASH). Neither the AMA, ASH, Consortium nor its members shall be responsible for any use of the Measures.

THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

© 2006–7 American Medical Association and American Society of Hematology. All Rights Reserved. Applicable FARS/DFARS Restrictions Apply to Government Use.

Limited proprietary coding is contained in the Measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The AMA, ASH, the Consortium and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

CPT® contained in the Measures specifications is copyright 2010 American Medical Association. LOINC® copyright 2004 Regenstrief Institute, Inc. SNOMED CLINICAL TERMS (SNOMED CT®) copyright 2004 College of American Pathologists (CAP). All Rights Reserved. Use of SNOMED CT® is only authorized within the United States.

Physician Quality Reporting System 2011 Measure 67, Effective Date 01/01/2011
© 2006–7 American Medical Association and American Society of Hematology. All Rights Reserved.
CPT® copyright 2010 American Medical Association