

# CMS Assigns Payment Rate for New Procedure Code for Automated Quantification and Characterization of Coronary Atherosclerotic Plaque

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OAK BROOK, Ill. (October 13, 2022) — The Centers for Medicare and Medicaid Services (CMS) recently assigned a Current Procedural Terminology (CPT) code for automated quantification and characterization of coronary atherosclerotic plaque. This additional CPT code supports quantitative imaging and aligns with the mission and goals of the Radiological Society of North America's ([RSNA](#)) Quantitative Imaging Biomarkers Alliance ([QIBA](#)).

On September 9, CMS released the October 2022 update of the Hospital Outpatient Prospective Payment System (OPPS). In this OPPS update, CMS assigned a payment rate of \$900-\$1000 for the automated (computerized) quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography CPT code.

Payment for the new Level III code—the first to provide reimbursement for computerized coronary plaque quantification and characterization—became effective October 1, 2022. The reimbursement associated with the performance of advanced, computerized quantification is in addition to the current Level I reimbursement for the clinical performance and interpretation of coronary computed tomography angiography (CCTA), where plaque quantification and characterization is typically done in a semi-quantitative, subjective manner.

“Quantitative imaging biomarkers with high repeatability and reproducibility are one way to provide improved patient care and lower the cost of healthcare,” said QIBA chair, Timothy J. Hall, Ph.D., professor in the Departments of Medical Physics and Biomedical Engineering at the University of Wisconsin.

Quantitative imaging is the extraction of quantifiable features from medical images for the assessment of normal or the severity, degree of change, or status of a disease, injury or chronic condition relative to normal.

The ability of advanced technologies to perform accurate plaque quantification and characterization represents a significant advance in the field of atherosclerosis imaging and is an area of clinical interest. Quantitative measurement of plaque volume and characterization of plaque in a standardized manner, based on histological ground truth, offer patients and providers with high precision measures of patient risk, benchmarked tracking of plaque progression and quantitative response assessment to therapies that are superior to current approaches used in clinical care.

QIBA was formed by RSNA with the mission to improve the value and practicality of quantitative imaging biomarkers by reducing variability across devices, sites, patients and time. The automated estimation of quantitative imaging biomarkers, as supported through this new CPT code, is consistent with those goals.

RSNA is an association of radiologists, radiation oncologists, medical physicists and related scientists promoting excellence in patient care and health care delivery through education, research and technologic innovation. The Society is based in Oak Brook, Illinois. ([RSNA.org](#))