

**CY 2011 Proposed Rule
Physician Fee Schedule
(CMS 1503-P)**

**Direct Practice Expense Values Used To Create
Resource-Based Practice Expense Relative Value Units**

CONTENTS:

These files contain resource inputs used in the calculation of the practice expense relative value units that appear in the Proposed Rule (CMS 1503-P) for CY 2011. There are 3 different types of practice inputs: clinical staff (labor), disposable medical supplies, and medical equipment.

There are four sets of files:

- Three sets of files contain inputs based on combination of procedure code and resource input type (labor, equipment and supplies).
- The fourth set is the direct sum input record, which sums select data by procedure code, from each of the three input types.

There are four versions of each set of files:

- Those files with the suffix “75” are the inputs used in developing the practice expense RVUs for services impacted by the equipment utilization assumptions specified in the ACA and described in section II.a.3.A of the Proposed Rule (CMS 1503-P) for CY 2011.
- The files with the suffix “50 70” are the inputs used in developing the practice expense RVUs for services not impacted by the equipment utilization assumptions specified in the ACA and described in section II.a.3.A of the Proposed Rule (CMS 1503-P) for CY 2011.
- There are 508 compliant versions of each of the eight files described above.

The source of the resource inputs are from one of the following:

- Clinical Practice Expert Panels (CPEPs) convened in 1995 to develop estimates of the different types of resource inputs necessary to perform medical services,
- A crosswalk to a related service developed based upon a clinical opinion by CMS,
- The AMA’s Relative Value Update Committee (RUC),
- Refinement of the CPEP inputs by the AMA’s Practice Expense Advisory, committee (PEAC) or the Practice Expense Review Committee (PERC) (which replaced the PEAC in September 2004) or the RUC Practice Expense Subcommittee (which took over the PERC’s role in September 2007),
- CMS’s clinical judgment, or
- A medical specialty society.

These files are the most current direct practice expense input files available.

These files are subject to change based upon CMS and RUC analysis.

DATA ELEMENTS:

(1) The **LABOR** files contain the following data elements:

Data Element	Description
PROCCODE	The AMA CPT code or HCPCS code.
SOURCE	Identifies the source of the resource inputs: the PEAC, RUC, a clinical judgment by CMS, a crosswalk by CMS or a medical specialty society.
CPEP	If the service has been refined, the source will indicate "PEAC" or "RUC" and the value for CPEP will indicate "RUC."
STAFF CODE	The code for type of clinical staff.
DESC	A description of the clinical staff type.
RATE	Rate per minute for the clinical staff type.
G0_I	Clinical staff time associated with pre-service period when the service is performed in a non-facility setting.
G1_I	Clinical staff time associated with the intra-service period when the service performed in a non-facility setting.
G1X_I	Clinical staff time associated with the post-service period when the service is performed in a non-facility setting.
G0_O	Clinical staff time associated with pre-service period when the service is performed in a facility setting.
G1_O	Clinical staff time associated with the intra-service period when the service performed in a facility setting.
G1X_O	Clinical staff time associated with the post-service period when the service is performed in a facility setting.
IN	Indicates whether the service was valued in non-facility settings.
OUT	Indicates whether the service was valued in facility settings.
SOURCECD	Identifies a source or reference code that was used to determine the resource inputs for crosswalked codes.
GLOB	The global period associated with the service.
STAFTYPE	Identifies the previous code used to identify the staff type.
PEAC_MTG	Identifies the PEAC meeting date when the code/service was refined.
PEAC_TAB	Identifies the associated Tab of the PEAC Agenda book when code/service was refined.

(2) The **EQUIPMENT** files contain the following data elements:

Data Element	Description
PROCCODE	The AMA CPT code or HCPCS code.
SOURCE	Identifies the source of the resource inputs: the PEAC, RUC, a clinical judgment by CMS, a crosswalk by CMS or a medical specialty society.
CPEP	If the service has been refined, the source will indicate "PEAC" or RUC" and the value for CPEP will indicate "RUC."
Equip_Category_05	General description of equipment category.
Equip_Code_05	The equipment code identifying the type of equipment.
Description	Description of Equipment.
LIFE	Useful life of the equipment.
PRICE	Purchase price of the equipment.
EQTI	The time associated with use of the equipment in non-facility settings.
EQTO	The time associated with use of the equipment in facility settings.
Valued_NF	Indicates whether the service was valued in non-facility settings.
Valued_FAC	Indicates whether the service was valued in facility settings.
SOURCECD	Identifies a source or reference code that was used to determine the resource inputs for crosswalked codes.
GLOB	The global period associated with the service.
PEAC_mtg	Identifies the PEAC meeting date when the code/service was refined.
PEAC_tab	Identifies the associated Tab of the PEAC Agenda book when code/service was refined.
2004_code	Identifies the previous code used to identify the equipment.

(3) The **SUPPLIES** files contain the following data elements:

Data Element	Description
PROCCODE	The AMA CPT code or HCPCS code.
SOURCE	Identifies the source of the resource inputs: the PEAC, RUC, a clinical judgment by CMS, a crosswalk by CMS or a medical specialty society.
CPEP	If the service has been refined, the source will indicate "PEAC" or "RUC" and the value for CPEP will indicate "RUC."
CATEGORY_05	General supply category.
Supply_Code_05	The supply code identifying the type of supply.
QTY_05	Invoice quantity.
UNIT_05	Unit measure.
PRICE	Invoice or other validated price.
QTY_NF	Quantity used for the procedure in the non-facility setting.
QTY_FAC	Quantity used for the procedure in the facility setting.
in_cost	Cost of the item associated with the procedure in the nonfacility setting. This equals Invoice Quantity * Invoice Price / Invoice Quantity * Quantity-In.
out_cost	Cost of the item associated with the procedure in the facility setting. This equals Invoice Quantity * Invoice Price / Invoice Quantity * Quantity-Out.
GLOBAL	The global period associated with the service.
Post_Op_Visits	Post-Operative Visits. Used to determine the number of supply cost packages for each code. In the facility setting, the number of packages equals the number of post-op visits. In the non-facility setting, the number of packages equals the number of post-op visits plus 1.
Source_for_Xwalk	Identifies a source or reference code that was used to determine the resource inputs for crosswalked codes.
PEAC_mtg	Identifies the PEAC meeting date when the code/service was refined. Some also note, for new codes, the year added to CPT, such as "CPT07."
PEAC_tab	Identifies the associated Tab of the PEAC Agenda book when code/service was refined.

(4) The **DIRECT INPUTS SUM** files contain the following data elements:

Data Element	Description
PROCCODE	The AMA CPT code or HCPCS code.
NAFLGNFC	Indicates whether the service was valued in non-facility setting.
NAFLGFC	Indicates whether the service was valued in facility setting.
G0_I	Value of the Clinical staff's time associated with pre-service period when the service is performed in a non-facility setting.
G1_I	Value of the Clinical staff's time associated with the intra-service period when the service performed in a non-facility setting.
G1X_I	Value of the Clinical staff's time associated with the post-service period when the service is performed in a non-facility setting.
G0_O	Value of the Clinical staff's time associated with pre-service period when the service is performed in a facility setting.
G1_O	Value of the Clinical staff's time associated with the intra-service period when the service performed in a facility setting.
G1X_O	Value of the Clinical staff's time associated with the post-service period when the service is performed in a facility setting.
PXEQ_I	The total value of the equipment for the service when performed in the non-facility setting.
PXEQ_O	The total value of the equipment for the service when performed in the facility setting.
IN_COST	The total value of the medical supplies linked with the service in non-facility setting.
OUT_COST	The total value of the medical supplies linked with the service in facility setting.

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