

American Rhinologic Society - Volume 23:1 Fall 2003



Don Lanza, MD, FARS
President

Hooray for an active and involved ARS membership! At this time a record number of members are involved in the day to day functioning of this society. It is this member involvement that has transformed this organization and made it so exciting to be a part of. In this, my last presidential report in Nose News, there are many ARS activities I must share with you. These include reports on CPT codes, Mayo Clinic patents, ARS Awards, and important dates and locations.

First, Fred Kuhn and I were your ARS representatives during a May meeting with members of the Center for Medicare and Medicaid Services (CMS). Along with AAO-HNS emissaries (Dr. Richard Wasguespack, Dr. David Neilsen,

Additionally, the Patient Advocacy Committee continues to work hard over several issues regarding the CPT-code 61795 that describes stereotaxic navigation during sinus surgery. With legal advice from Beth Roberts (Hogan & Hartson), Michael Sillers, MD and Joe Jacobs, MD prepared a request to CMS to add 61795 to their list of appropriate codes used in ambulatory care centers. The decision is pending. Again, this same committee has also worked hard through the AAO-HNS to identify the appropriate practice expense of non-physician work associated with office endoscopy codes. For more information on these activities please see Dr. Sillers', "Patient Advocacy Report" in this issue.

In an unrelated issue, recently, a broad and sweeping "methods patent" was given to the Mayo Clinic for the procedure of topically applying all existing antifungal agents (including macrolides) to treat rhinosinusitis, otitis media, asthma and gastroenterological disease. Some physicians hold that such a patent on a procedure is a violation of the Hippocratic Oath. In an April 29th issue of the Wall Street Journal (WSJ), "Dr. Ponikau insist(ed) that some veteran doctors are stuck in old textbooks and want to keep up demand for sinus surgery. The procedure, which removes sinus tissue to give a patient more breathing room, can cost \$10,000 or more." Many in our ARS membership found this public stance outrageous and defamatory of

ARS 1954-2004: FIFTY YEARS OF RHINOLOGY

New York City, September 17-18, 2004

Teresa Lee, and Dr. Jim Denny), we met to discuss the future of 31237, the CPT-code for endoscopic polypectomy, biopsy and post-operative debridement. In addition we, the ARS, brought our legal council, Laura Loeb, (from the "FESS mess") to assist with our position. CMS requested this meeting because certain insurers have contacted them complaining that 31237 is too broad and includes many separate procedures. Additionally, Massachusetts Blue Cross/Blue Shield (MBCBS) stated that documentation for proper use of 31237 by otolaryngologists was limited and not consistent with the level of work described in vignettes associated with this code. Thus, CMS is considering a potential split in the CPT code 31237 into G-code which is similar to the S-code in Massachusetts. This S-2343 code currently describes a limited procedure of suctioning in the anterior middle meatus during post-operative endoscopic debridement. During this meeting with CMS, we furnished evidence that 31237 is not being over utilized relative to the number of ethmoidectomies performed annually. We also pointed out that as a result of improved post-operative care associated with 31237, that there could be a decline in operating room revision sinus procedures. This is despite the fact that our patient populations with chronic unremitting sinus disease appears to be growing. Thus, we recommended no change in the existing code. At the conclusion, CMS agreed to investigate and discuss the issues further with the ARS & the AAO-HNS. Currently we hold that the Massachusetts S-code is improperly worded (Nose New Vol. 21:3 pg 6 Summer 2002) and open to misinterpretation by insurers. Furthermore, the 1993 recommendations and surveys were not given appropriate consideration in assigning relative work value to that code by MBCBS. Additionally, listed as a bilateral code, S-2343, does not take into account that a formal and extensive debridement/polypectomy could be carried out on one side while a more limited procedure is performed on the contralateral side.

otolaryngologists who work hard in the best interests of science and their patients. Thus, we believed a response to the WSJ was warranted on not only on behalf of our membership but more importantly for our patients who are misled to believe that the Mayo Clinic has a developed "a cure" for rhinosinusitis. In this issue of Nose News we present a copy of the ARS letter sent and published in the WSJ in June 2003.

On a much more positive note, congratulations belong to, Marc A. Tewfik, B.Sc. and his co-authors for their excellent bench research project "Nitric Oxide and Collagen Expression in Allergic Upper Airway Disease," which was recognized with the ARS Research Award at the COSM in Nashville. The Cottle Award, oriented towards clinical research, will be issued at the start of the Annual Business Meeting in Orlando along with The International Rhinology Research Award. The deadline for manuscripts to be received for these awards is August 1st, 2003. Congratulations also belong to Joel R. Perloff, MD (Univ. of PA) & Alex G. Bien, MD (Univ. of Nebraska) for receiving The ARS Resident Research Grants, for their research proposals called "Evaluation of Biofilms in Chronic Rhinosinusitis" and "Nasal Mucosal Sensitivity in Young and Old", respectively. Each was valued at \$8,000.00. At COSM, the ARS nominating committee (cont'd)



Annual Meeting, Orlando, September, 2003

Your ARS

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MAKE PLANS NOW!



50th Anniversary ARS Meeting
September 17-18, 2004
New York Hilton, New York City
Honored Guest: David W. Kennedy



Do you want to stay at the forefront of rhinologic knowledge?

Are you concerned about patient advocacy issues such as 31237 and 61795?

FOR YOUR PATIENTS-FOR YOU
Join at www.american-rhinologic.org today!

JOIN THE ARS!

WHAT'S AHEAD?

August 1, 2003

Deadline for Cottle Award Submission

September 20, 2003

ARS Fall Meeting, Orlando, FL

October 23-26, 2003

IRS/ISLAN Seoul, South Korea

November 1, 2003

Abstracts Due, Spring Meeting, 2004

December 6, 2003

ARS Winter Board Meeting, NYC

December 15, 2003

CORE Grant Letter of Intent Due

April 30, 2004

ARS Spring Meeting, Phoenix, AZ

September 17-18, 2004

ARS Golden Anniversary Fall Meeting, NYC



GYRUS
ENT

The American Rhinologic Society would like to thank Gyrus ENT for partnering with the ARS Newsletter for 2003

PRESIDENT'S LETTER (CONTINUED)

DONALD LANZA, MD, FARS

motioned for Drs. Steven Marks and Winston Vaughan to become members of the Board of Directors on September 21st. Howard Levine, MD was proposed to become the next 2nd Vice President and chair of the Committee on Committees.

This year's Annual ARS meeting will be held Saturday, September 20th, at the Peabody Hotel in Orlando, Florida. Jim Hadley, reports that our International Guest of Honor, will be Professor Claus Bachert, from Belgium. Prof. Bachert has advanced research on staphylococcus superantigens to determine if they could play a significant role in causing and sustaining chronic rhinosinusitis. The entire annual meeting will benefit from an Audience Response System and you can register for the meeting on-line at www.american-rhinologic.org. The Cottle awards and International Rhinology Research Awards will be named at the conclusion of the scientific session on Saturday, Sept. 20th, 2003.

The ARS' 2nd Annual CME Dinner Symposium entitled, "The Inflammatory Pathway in Chronic Rhinosinusitis Pathophysiology: Present and Future Therapeutic Considerations", is hosted and moderated by Joe Jacobs, our 1st Vice President. We will have presentations by Drs. Dan Hamilos, Jens Ponikau and Brad Marple. It will be held at 6 pm at the Peabody Hotel on Saturday Sept 20th. Again, we are fortunate to have this evening fully funded by an unrestricted educational grant from Merck & Co. Inc. Seating will be limited and offered on a first come, first serve basis (with preference to our ARS members) through our online "special event registration" module.

At the beginning of this Dinner Symposium, the "Presidential Service Awards" will be granted to those "who selflessly were devoted above and beyond the call" towards the advancement of this society. These will go to Martin J. Citardi, MD (Information Technology Committee) and to Marvin P. Fried, MD (Secretary). At the conclusion of the evening, I will "hand off the baton" to my successor James A. Hadley, MD. This is a particularly special time for the history of our society, since Jim's father, Richard B. Hadley (deceased) was also a President of the ARS in 1967. I wish Jim Hadley the best of success during our 50th anniversary.

The deadline for abstract submission to our COSM 2004 meeting in Phoenix at the Marriot Dessert Ridge is November 1st. These can only be submitted online at www.american-rhinologic.org. Mark your calendar for our Golden

Anniversary Celebration from Sept. 17-18th, 2004 at the Hilton New York, NYC when David W. Kennedy, will be our society's Honored Guest.

I would like to take this opportunity to thank you, our members for your continued support of this organization. (Anticipate your dues notices for the fiscal year 2004 to be received in November 2003....Yuk!). Additionally, if you are not a member, but are practicing rhinology and believe in the direction of this society we need your support. You can join by obtaining a membership application at our website www.american-rhinologic.org.

As I close, I have many to thank. Thanks go to Marshall Strome, MD (Chair, Otolaryngology, The Cleveland Clinic Foundation) for being supportive of the time I have needed to fulfill my presidential responsibilities this year. Thanks belong to Drs. Jonas Johnson, Jennifer Derebery, and David Nielsen of the AAO-HNS and Dr. Bruce Gordon and Jami Lucas of the American Academy of Otolaryngic Allergy for increasing their collaborative efforts with our society. Again, I would again like to thank Drs. Fred Kuhn, Mike Benninger, and Charlie Gross for nominating me to this role as President for the ARS. I would also like to thank the members of the ARS board for their wisdom, enthusiasm, excellent work, and responsiveness. Specifically, I would like to thank Drs. Daniel Becker and Bill Bolger, whose substantial efforts on the Membership Committee and By-laws Committee (respectively) might otherwise go unnoticed. Thanks also go to Brent Senior, editor of this

newsletter, for effectively delivering our ARS messages to you.

Lastly, but by no means least, I'd like to thank Dr. David Kennedy for his continual support and mentorship which over the years has made a huge difference in my career. He involved me in the ARS as one of his consultants to the BOD during his ARS presidency in 1992. I would like to thank Dr. Loring Pratt, who has been my mentor since our first meeting in 1984. My greatest appreciation and admiration, however, go to my wife Suzanne and sons, Douglas and Andrew for the sacrifices they have made and the support they have given me towards the success of this Presidential year. Thank you!

See you in Orlando for a great meeting!



American Rhinologic Society

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May 14th, 2003

Paul A. Gigot,
Editor of the Editorial Page
Wall Street Journal
200 Liberty Street
New York, New York 10281
Tel 212-416-2000

Dear Mr. Gigot,

We would like to congratulate Peter Lander on his April 30th article concerning the broad and sweeping patent issued to the Mayo Clinic. As suggested in this article, a patent such as this one does not appear to be in the best interest of patients, whom we, the physicians treating them, are pledged to serve. This patent to treat inflammation caused by non-invasive fungus covers both the preparation and administration of commonly used antifungal agents when applied to the nose as well as to other areas of the respiratory tract. The concept that fungus is a singular driving force behind chronic sinusitis is not accepted by scientists worldwide.

We, the officers of the American Rhinologic Society, have many concerns regarding this patent, including the fact that, as written, it broadly includes treatments that physicians have been using for years. Additionally, Dr. Ponikau's comment in the MSJ article that research in this area has been stunted because sinus surgery is well remunerated is both offensive and inaccurate to the many clinicians and scientists who devote themselves to answering critical questions aimed at improving patient care.

Nonetheless, the critical public issue here is whether this type of treatment methodology, which is an outgrowth of existing treatments, should receive patent protection at all. Physicians have been developing new methods for treating patients for generations without obtaining patents. The role of the physician is to pass these methods on to as many other physicians as possible, so that more patients may be effectively treated. Awarding patent protection for such treatment methods will limit, and potentially stifle, the use of evolutionary techniques to treat patients. Just as the first physician to discover that sinusitis can be irrigated to manage sinusitis did not patent his method, sinus irrigation with existing antifungal agents, too, should not be patented. Antifungal agents are not new, nor is the concept of topically administering them to the nose. What is new is Dr. Ponikau's sincerely held conviction that administering antifungal agents to the sinuses may effectively treat a common form of sinusitis. While physicians may reasonably differ on the effectiveness of this proposed treatment, it must be recognized that awarding such a patent will essentially create a stranglehold on current and future treatments. While Dr. Ponikau and the Mayo Clinic pledge not to prosecute any physician who utilizes topical antifungal therapy, it must be recognized that the next physician to develop a new treatment method may not feel so confident. The WSJ is correct in questioning whether this is what major medical facilities, which have been traditionally focused on providing superior patient care, should be doing.

In summary, while recognizing the undeniable right of institutions and individuals who make new discoveries to copyright and to benefit from them, the award of these patents to the Mayo Clinic would appear to raise serious questions about current patent policy and its effects on scientific peer review and, ultimately, on our ability to provide the most appropriate patient care.

Respectfully

Donald C. Lanza, MD
President

Marvin P. Fried, MD
Secretary

David W. Kennedy, MD
Treasurer

CC: Peter Lander, Francine Schwedel

American Rhinologic Society Annual Meeting September 20, 2003

Peabody Hotel, Orlando

Donald C. Lanza, MD, FARS

President

American Rhinologic Society

James Hadley, MD, FARS

President-elect, Program Chair

American Rhinologic Society

Claus Bachert, MD

Ghent University, Belgium

Honored International Guest

Register at www.american-rhinologic.org

We invite you all to the Fall Annual meeting of the ARS. Florida in September will be an excellent time to review the progress of the ARS. The Fall ARS Annual Meeting will be held at the Peabody Hotel in Orlando, Florida on September 20, 2003.

The Program Committee is pleased to present the papers selected through rigorous review process. The competition for presentation at the annual meeting remains strong and excellent papers were changed to poster presentations for review.

This year, I am pleased to announce the International Guest Speaker to be Professor Dr. Claus Bachert, from Ghent, Belgium. Dr. Bachert is an internationally recognized expert in evaluation of the inflammatory process in the nose. He will present his data on Inflammatory mediators in rhinosinusitis to bring us all up to date in the current controversy of inflammatory vs infectious etiology of rhinosinusitis.

Patient advocacy issues and socio economics will be reviewed by a panel from the Patient Advocacy Committee chaired by 2nd VP, Michael Sillers

The ARS will highlight the day with the evening gala dinner CME event sponsored again by Merck. This presentation will discuss chronic rhinosinusitis and will feature presentations by Dr. Daniel Hamilos, and Dr. Brad Marple.

Jim Hadley, MD, FARS

President-Elect and Program Chair

<u>Time</u>	<u>Event</u>	<u>Presenters, Moderators & Discussants</u>
8:00	Introductions and Meeting Agenda Surgical Techniques	Lanza & Hadley Richard Orlandi & Stilianos Kountakis Joseph Han Peter J. Catalano, MD, FACS
8:05	Surgical Revision of the Obliterated Frontal Sinus	
8:12	Management of the Inferior Turbinate in Chronic Sinusitis	
8:19	Three Wall Orbital Decompression: Results Using Image Guided Surgery and Lateral Orbitotomy	Howard L. Levine, MD
8:26	Comparison of Traditional Craniofacial Resection and Minimally Invasive Endoscopic Resection of Anterior Skull Base Neoplasms	Pete S. Batra, MD James Stankiewicz & Howard Levine Metin Onerci Thianchai Tangsujarittham, MD
8:34	Discussion	
8:39	Endonasal Surgery of Juvenile Nasopharyngeal Angiofibroma	
8:46	Endoscopic Frontal Sinusotomy: A Six Year Experience	
8:53	Endoscopic Sphenopalatine Artery Ligation for Epistaxis: Clinical Experience	Allison C. Ford, MD
9:00	Race and Gender Differences in Frequency of Skull Base Erosion in Allergic Fungal Sinusitis	John M. DeGaudio, MD
9:07	Discussion Medical Outcomes	Joe Jacobs & Kathy Yaremchuk
9:14	Outcomes of the Extended Endoscopic Approach for Management of Inverted Papilloma	Gehua Zhang, MD
9:21	Correlation Between Preoperative Symptom Scores, Quality of Life Questionnaires and Staging with Computed Tomography in Patients with Chronic Rhinosinusitis	Peter John Wormald
9:28	Correlation Between CT Scores and Symptomatic Improvement After Endoscopic Sinus Surgery	Dewayne T. Bradley, MD Sarah Wise, MD
9:35	Patterns of Fungal Infections in Patients with Cystic Fibrosis	
9:42	Discussion	
9:45	Break with Exhibitors	

10:15	Invited Guest lecture ARS Guest of Honor Prof Dr. Claus Bachert Immunology of Rhinosinusitis - from mediators to classification	James Hadley Claus Bachert, MD
10:45	<i>Questions and Discussion</i>	
	Basic Science and Rhinology	
11:00	Immunohistologic findings suggest a key role of Cox-2 in nasal polyposis	Brent Senior & Peter J. Wormold
11:07	Analysis of Innate Immune Mediators in Sinonasal Mucosa	Jan Gosepath, MD Andrew P. Lane, MD
11:14	Endoscopic Biopsy of Human Olfactory Epithelium as a Source of Viable Neural Stem Cells	Welby Winstead, MD
11:21	<i>Discussion</i>	
11:26	Evidence of Bacterial Biofilms on frontal Recess Stents in Patients with Chronic Rhinosinusitis	J. Perloff, MD, J. Dutton & T. Tami
11:33	Acute Exacerbations of Chronic Rhinosinusitis (AECS) after Endoscopic Sinus Surgery are Infectious and Caused by Staphylococcus Aureus and gram-Negative Agents	Abdulmohsen Hussain, MD
11:40	<i>Discussion</i>	
11:45	Poster Moderators Review and Comments	
12:00	American Rhinologic Society Business - all ARS Members invited to attend	Lanza & Hadley
	Issues Confronting the Practicing Rhinologist	
12:30	Luncheon Symposium <i>Sponsored by Abbott</i> Antimicrobial Update in Rhinology: Perspectives from the Sinus & Allergy Health Partnership <i>Discussion and Audience Response Questions</i>	Michael S. Benninger, MD
	Adjunctive Medical and Surgical Techniques	
1:30	Effect of Saline Irrigation on Symptoms After Endoscopic Sinus Surgery: A Randomized, Controlled Clinical Trial	J. Pinto, M. Desrosiers & B. Marple
1:37	Environmental Air Fungal Load and Anti-microbial Nasal Sprays	Donald P. Dennis, MD
1:44	The Role of Mitomycin-C in Preventing Synechia and Stenosis After Endoscopic Sinus Surgery - A Long Term Follow-Up	Abtin Tabae
1:51	Effect of Estrogen on Olfactory Neuron Connections to the Olfactory Bulb	Samuel G. Shiley
1:56	<i>Discussion and Audience Response Questions</i>	
2:01	The Use of Acoustic Rhinometry in Evaluation of the Obstructive Sleep Apnea Patient	L. Morris, D. Leopold & J. DelGaudio Matthew A. Kienstra
2:08	Effects of the Nasal Muscles on the Nasal Airway	
2:15	Analysis of Possible Cross-Contamination with the Venturi Atomizer System	Joseph M. Scianna, MD
2:22	<i>Discussion and Audience Response Questions</i>	
2:27	Utilization and Efficacy of Hyaluronic Acid - Carboxymethylcellulose (HA-CMC) wafer in Prevention of Synechiae Reformation in the Clinic Setting	N. A. Cohen, P. Hwang & R. Kern
2:34	Platelet gel in lieu of Packing for Endoscopic Sinus Surgery	Jay M. Dutton, MD
2:41	<i>Discussion and Audience Response Questions</i>	
2:45	Break with Exhibitors	
3:15	Panel Discussion: Patient Advocacy Issues <i>Discussion and Audience Response Questions</i>	Michael Sillers
	Radiographic Evaluation	
4:10	Radiographic Variation of Nasofrontal Recess Anatomy	A. Beningfield, R. Casiano & E. Vining
4:18	Regions of the Sinus CT Scan that Predict Symptoms	Eric H. Holbrook, MD
4:26	Three-Slice Computerized Tomography for Diagnosis	Can Alper Cagici
4:34	Analysis of Methods to Assess Frontal Sinus Extent in Osteoplastic Flap Surgery: Transillumination vs. Six Foot Caldwell vs. Image Guidance	Christopher T. Melroy, MD
4:42	<i>Discussion and Audience Response Questions</i>	
4:50	Presentation of Awards for Research and Posters	Allen Seiden
5:00	Closing remarks	Lanza & Hadley

LISTENING TO OUR MEMBERS

AUDIENCE RESPONSE: A SAMPLING OF RESPONSES FROM THE SPRING ARS MEETING

WINSTON VAUGHAN, MD, FARS
CHAIR, EDUCATION COMMITTEE

The Audience utilized the Audience Response System at the Spring Meeting of the ARS in Nashville: A sampling of questions and responses follows addressing issues raised in papers presented, current patient advocacy issues and future directions for rhinology and the ARS

How can we improve the program?

- * 33 % : additional instructional courses
- * 28 % : more panel discussions
- * 16 % : as is

Do you know the 1997 diagnostic criteria for chronic sinusitis?

- * 79 %: yes
- * 21 %: no / unsure

Have studies on bone inflammation changed your practice?

- * 65 %: no
- * 15 %: changed use of both antibiotics and surgery
- * 16 % changed use of antibiotics

Use of endoscopy in the management of inverting papilloma:

- * 4%: diagnostic only
- * 18% endoscopic resection of small lesions
- * 27% resection of moderate-to-large lesions
- * 52 % nearly all lesions

Resident training in Rhinology is excellent (23 %), very good (42%), adequate (23 %), and poor (7 %)

Fellowships should: be accredited by ARS (46 %), develop

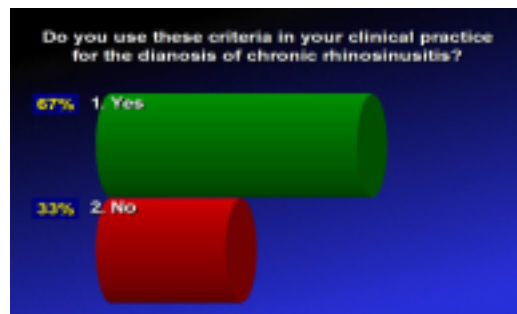
leaders (40 %), focus more on research than surgery (15 %)

ARS should educate the public by: development of office handouts etc. (37%), more media presence (32 %), consult a marketing company (22 %), or improve website (10 %).

ARS research should focus more on basic science (54 %) or outcome studies (32 %)

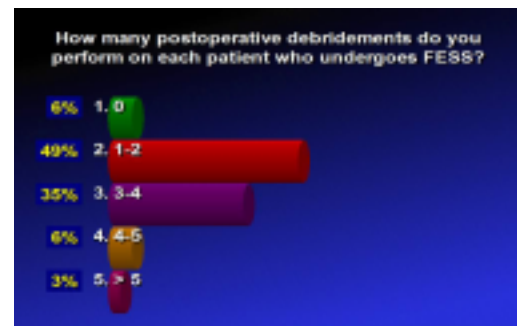
What % of FESS cases do you charge 31237?

- * 30 % responded 0 - 20 % of cases
- * 16 % = varying %'s between 20 - 80 %.
- * 54 % = 80 -100 %



How many postoperative debridements do you perform in each patient?

- * 1 – 2 times: 49%
- * 3 – 4: 35%
- * 4 – 5: 6%
- * do not perform: 6%



Do you utilize 31237 beyond 30 days ?

- * Yes, but rarely 44 %
- * No 33 %
- * Yes, more than twice 11 %
- * Yes 11 %

For 31237, 26% preferred a cap on # of times the code could be used vs. 74% preferred development of two codes for major or minor debridement

What % of cases do you utilize computer aided surgery?

- * 22% used 76 -100 % of the time.
- * 5%: 75 - 51 %

- * 80%: 50-26 %
- * 39% 25 – 1%
- * 16 percent did not use or was not available.

Would you perform FESS w/ a limited CT scan?

- * 80 % no
- * 20 % yes.

PATIENT ADVOCACY:

61795 REVISITED

MIKE SILLERS, MD, FARS
CHAIR,
PATIENT ADVOCACY COMMITTEE



The patient advocacy committee continues to work to enhance our ability to provide state-of-the-art care to our patients. The most recent issue has been the exclusion of 61795 from the list of CMS approved procedures performed in an ambulatory surgical center (ASC). Since this was exclusively a neurosurgical code prior to January 2000, it did not appear on the list. The implications of this are that the ASC would not be reimbursed for a facility fee for 61795. This omission does not affect the professional fee. However, as

most of us have learned, large capital purchases by surgery centers are generally not considered unless there is a measurable cost benefit to the facility. The ARS through its legal counsel has petitioned CMS to include 61795 on the list of approved procedures for an ASC. The basic argument was that since this is an add-on code, and the CPT codes to which it is typically linked were on the list, 61795 should be included. The formal letter that was submitted to CMS May 27, 2003, will be posted on the ARS website.

The practice expense (PE) component of all but the 90-day global period codes have been submitted to CMS. Their proposed rule should be available in June 2003. The final rule will be published in November or December 2003. The PE component of the 90 day global CPT codes will be presented to the Practice Expense Advisory Committee (PEAC) in January of 2004. Since reimbursement dollars are fixed, the final rule including all CPT codes may result in some adjustment of the values of CPT codes presented in this year's final rule.

Finally, Don Lanza and Fred Kuhn represented the ARS at a recent meeting with CMS regarding 31237. CMS has considered several options to reduce what they believe to be "over utilization". Data was presented to suggest otherwise, and CMS has agreed to investigate and continue communication with the ARS and our Academy.

2003 ARS CORPORATE AFFILIATES

DIAMOND (\$80,000)
MERCK

PLATINUM (\$10,000)
AVENTIS PHARMACEUTICALS

GYRUS ENT

GOLD (\$5,000)

KARL STORZ ENDOSCOPY-AMERICA
SINUS PHARMACY

SILVER (\$2,500)

BAYER PHARMACEUTICALS
MEDTRONIC-XOMED

ORTHO MCNEIL PHARMACEUTICALS

RICHARD WOLF MEDICAL INSTR. CORP

BRONZE (\$1,000)

GE MEDICAL SYSTEMS NAVIGATION AND
VISUALIZATION

ABBOTT LABORATORIES

FRIEND OF OUR SOCIETY (\$500)

BRAINLAB

NOSE NEWS CONTRIBUTORS

PARTNER

GYRUS ENT

FRIEND

BRAINLAB

SINUS PHARMACY

September 20, 2003, Orlando Peabody Hotel

The Second Annual ARS CME Dinner: The Inflammatory Pathway in Chronic Rhinosinusitis: Present and Future Considerations



Joe Jacobs, MD, FARS, Moderator

Speakers: Dan Hamilos, MD, Jens Ponikau, MD, Brad Marple, MD

Register Today! www.american-rhinologic.org, GoTo "Special Event Registration"

Sponsored by an Unrestricted Educational Grant from Merck

www.american-rhinologic.org

JOIN THE ARS!

American Rhinologic Society
Marvin P. Fried, MD, FACS
Department of Otolaryngology
Montefiore Medical Center
3400 Bainbridge Avenue
Third Floor
Bronx, NY 10467



Upcoming Rhinology Meetings and Courses

- | | |
|----------------------------------------------------------------------|---------------------------------------|
| <i>Charleston Sinus Course</i> | September 5-6, 2003 |
| Medical University of South Carolina | Contact: Nichele 843-792-6012 |
| <i>Rhinofest 2003: 17th Biennial Course</i> | October 9-12, 2003 |
| Mayo Clinic, University of Buffalo, and Graz University | Contact: Tracy 507-284-1729 |
| <i>Advanced Functional Endoscopic Sinus Surgery Courses</i> | October 23-25, 2003 |
| Georgia Nasal and Sinus Institute | Contact: Shirley Johnson 912-350-7365 |
| <i>Endoscopic Sinus Surgery</i> | October 24-26, 2003 |
| Univeristy of Pittsburgh | Contact: maplek@msx.upmc.edu |
| <i>Advances in Endscopic Management of Nasal and Sinus Disorders</i> | November 6-8, 2003 |
| Cleveland Clinic Foundation | Contact: Anne Monreal 216-444-4949 |
| <i>Carolina Course in Sinus Surgery and Facial Plastic Surgery</i> | April 2-3, 2004 |
| University of North Carolina | Contact: Elizabeth 919-966-3342 |
| <i>Current and Advanced Techniques in FESS</i> | July 21-24, 2004 |
| St. Paul's Sinus Center, UBC, Vancouver | Contact: Luke 604-822-6434 |

If you would like to have your upcoming rhinology meeting noted here, simply provide the editor with pertinent information: newsletter@american-rhnologic.org

The American Rhinologic Society does not endorse these meetings but simply provides this list as a service to its members

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