November 07, 2025

VIA Electronic Mail to NCCIPTPMUE@cms.hhs.gov

Center for Program Integrity
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244

RE: Request to Establish Medically Unlikely Edit (MUE) of 3 for New CPT Code 87494

To Whom It May Concern:

On behalf of the Point of Care Testing Association (POCTA), we are writing to request that CMS establish a medically unlikely edit (MUE) of three (3) for new CPT code 87494. POCTA is a collaborative effort among manufacturers of point of care (POC) diagnostic technologies that enable clinicians to monitor chronic conditions, diagnose illnesses, and provide timely information for patients in a variety of care settings, from physician offices to pharmacies to community centers to non-hospital facilities. POCTA seeks to facilitate access to safe, effective, and cost-effective patient testing at the time of treatment. POCTA works to develop reimbursement and regulatory policies that can improve health outcomes by supporting access to POC testing.

Effective January 1, 2026, the CPT Editorial Panel approved a new code – 87494 – for multiplex amplified probe tests that detect and report individual results for chlamydia and gonorrhea. The full code descriptor reads as follows:

> *Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis and Neisseria gonorrhoeae, multiplex amplified probe technique*

We respectfully request that CMS establish an MUE of 3 for 87494 for the following reasons.

Medical Necessity

Chlamydia and gonorrhoeae may occur at multiple locations. As such, it may be medically necessary to test multiple specimens from different anatomical locations on the same date of service. For example, the CDC recommends screening for chlamydia and gonorrhoeae at multiple sites of contact (such as urethra, rectum, pharynx) depending on reported sexual behaviors and exposure to ensure accurate and comprehensive detection and appropriate treatment.[1] The specimen from each site must be tested separately since each panel only detects pathogens

[1] CDC. Sexually Transmitted Infections Treatment Guidelines, 2021; Screening Recommendations and Considerations Referenced in Treatment Guidelines and Original Source. Accessed 11/04/2025 https://www.cdc.gov/std/treatment-guidelines/screening-recommendations.htm

present in a single specimen. Setting 87494's MUE at 3 is important to enable testing across all relevant anatomical sites, facilitating comprehensive evaluation and effective treatment.

Consistency with MUEs for Individual Analyte Codes

Setting the MUE for 87494 at 3 would be consistent with the MUEs established for the individual amplified probe nucleic acid tests for chlamydia trachomatis and Neisseria gonorrhoeae, respectively:

- 87491; Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, amplified probe technique
  - MUE value: 3
- 87591; Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique
  - MUE value: 3

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If you have any questions about this request, we would be pleased to meet to discuss at your convenience. Please contact Mike Ryan at 202.756.8088, or via e-mail to mryan@mwe.com, if we can be helpful to you in any way.

Sincerely,

Mike Ryan
On behalf of the Point of Care Testing Association