August 1, 2022

The Honorable Chiquita Brooks-LaSure, Administrator
Centers for Medicare & Medicaid Services Department of Health and Human Services
Attention: CMS-1770-P
Mail Stop C4-26-05 7500 Security Boulevard
Baltimore, MD 21244-1850
Submitted via: www.regulations.gov

Re: CMS-1770-P; Medicare and Medicaid Programs: Calendar Year 2023 Payment Policies under the Physician Fee Schedule and Other Changes to Part B Payment Policies, Medicare Shared Savings Program Requirements, etc.

Dear Administrator Brooks-LaSure:

The Society of Interventional Radiology (SIR) is a professional medical association representing approximately 8,000 members, including most US physicians practicing in the specialty of vascular and interventional radiology. The Society is dedicated to improving public health through pioneering advances in minimally invasive, image-guided therapies. Therefore, SIR appreciates the opportunity to provide updated salary data related to the clinical labor staff changes initiated in CY 2022 to be phased in over four years as part of the Centers for Medicare and Medicaid Services (CMS) CY 2022 Revisions to Payment Policies under the Physician Payment Schedule and Other Changes to Part B Payment Policies final rule to allow for reconsideration of the clinical labor values. Additionally, SIR seeks to have CMS update the clinical labor description of Angio Technician to Vascular Interventional Technologist to align with industry recognition of this advanced certification, as well as increase the rate per minute to align with current industry salary data.

The clinical labor staff calculations address the payment for the technologists (e.g., Vascular Interventional Technologist) that work with the interventional radiologists in the performance of their procedures. The ARRT (American Registry of Radiologic Technologists) has a basic certification for a radiologic technologist (RT), and there are many advanced modality certifications for an RT, such as Computed Tomography (CT), Magnetic Resonance (MR), and Vascular Intervention (VI) (called angio technician by CMS). Many RTs will seek additional educational programs and training for these advanced modalities/disciplines when entering a career. For example, a vascular interventional technologist (currently referred to by CMS as an angio technician) assists physicians with minimally invasive, image-guided vascular procedures, including angioplasty, stent placement, thrombolysis, and also many non-vascular interventions. Using sophisticated fluoroscopic and other imaging equipment, they are responsible for capturing images of the blood vessels as well as assisting the physician during the procedure. To earn the certification in vascular interventional radiography, they must complete a post-primary eligibility pathway. This requires, among other things, that the individual already hold a primary credential (i.e., radiologic technologist).

Within the CY 2022 MPFS proposed rule, CMS proposed to update the clinical labor rates using CY 2019
survey data from the Bureau of Labor and Statistics (BLS) and other supplementary data when BLS data lists are not available applied in a single-year implementation. In response to this, SIR urged CMS to reconsider and use the BLS median wage data, instead of mean wage data, to capture typical wage rates and be more accurately consistent with the median statistic used for clinical staff time.

Additionally, SIR specifically commented on the proposed values related to “Angio Technician.” CMS had proposed using BLS category 29-9000 Other Healthcare Practitioners and Technical Occupations as the proxy BLS wage rate for the Angio Technician. Historically, CMS had applied the crosswalk using primary radiologic technologists to the angio technician proxy BLS wage rate. SIR strongly disapproved of this crosswalk and the proposed updated crosswalk to “Other Healthcare Practitioners and Technical Occupations,” due to the severe undervaluing of the median salary compared to the actual wage amounts being paid to “angio technicians” (technologists).

As a clinical staff member, an "angio technician" is most representative of an advanced level VI certified Radiologic Technologist. SIR requested in response to the CY 2022 MPFS proposed rule consideration be given to crosswalk the role of the "angio technician" to that of an “MR Technologist”; given an MR Technologist salary was more representative of the salary of a radiologic technologist with an advanced certification, such as VI, based on the data available at the time. According to the US Bureau of Labor Statistics, the median annual wage for magnetic resonance imaging technologists was $74,690 in May 2020, and the radiologic technologists and technicians were $61,900 in May 2020. Similar to the vascular technologist, and the magnetic resonance imaging (MRI) technologist also requires a post-primary pathway. Therefore, when the updated clinical labor rates went into effect, SIR recommended using 29-2035 Magnetic Resonance Imaging (MRI) Technologist as the proxy BLS wage rate for the "angio technician."

SIR also provided information on the complexity of the education and knowledge base of the angio technician, which we continue to believe is not the most appropriate clinical labor name to use. Since 2002 changes have been made to many of the job titles within radiology, and the most appropriate clinical labor type name for what was historically known as angio technician is vascular interventional technologist.

CMS did not move forward with SIR’s proposal of BLS category 29-9000 Other Healthcare Practitioners and Technical Occupations as the crosswalk for angio technician. Instead, CMS selected Lab/Histotechnologist, which according to CMS, is better aligned with data available from Salary Expert. This was an increase ($0.55 to $0.60) from the last data in 2002, but a decrease from the proposed value and does not even account for the baseline certification of radiologic technologist ($0.63), which has a higher rate per minute data than angio technician, which is an advanced certification above and beyond the radiologic technologist certification.

Since the release of the CY 2022 MPFS final rule, SIR met with CMS and discussed the possibility of submitting new salary data for consideration related to angio technician. CMS indicated they would consider new data if it was available. The American Society of Radiologic Technologists (ASRT) recently completed the Radiologic Technologist Wage and Salary Survey in 2022. A copy of the complete survey is provided with this comment letter.

The following table reflects CMS’s finalized rate per minute compared to the ASRT 2022 survey data and calculated rate per minute with included fringe benefit factor.
In reviewing the data from ASRT, SIR requests CMS update the services, which list the clinical labor description under Direct Practice Expense from angio technician to the clinical labor description vascular interventional technologist. SIR also requests CMS recognize vascular interventional technologists with the same assigned clinical labor type as Genetic Counselor, BLS 29-9092, crosswalk which has a similar median salary and a CMS rate per minute of 0.85.

SIR appreciates the opportunity to provide meaningful feedback regarding the clinical labor updates for the 2023 MPFS proposed rule. If you have any questions, please contact SIR’s Manager of Coding and Reimbursement, Ashley Maleki, at amaleki@sirweb.org or (703) 844-0378.

Sincerely,

Parag J. Patel, MD, FSIR
President, Society of Interventional Radiology

Cc: Keith M. Hume
Executive Director, Society of Interventional Radiology