Dear [insert payer contact],

As an obstetrician–gynecologist who provides services to your beneficiaries, I’m writing to urge you to work to advance the care provided to people seeking women’s health services by including coverage of the new CPT code for pelvic examinations (CPT code 99459) for services on or after January 1, 2024.

This practice expense-only code is intended to assist with the cost of pelvic examination packs, such as speculums, and [in-room chaperones](https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2020/01/sexual-misconduct) for patients receiving pelvic examinations during an [outpatient evaluation & management visit](https://acogcoding.freshdesk.com/support/solutions/folders/64000135318). In 2015, [52 million pelvic examinations](https://www.cdc.gov/nchs/data/ahcd/namcs_summary/2015_namcs_web_tables.pdf) were performed in the United States. By finalizing this new code, [payer] would be taking a crucial step to reimburse expenses incurred by obstetrician-gynecologists and other physicians performing pelvic examinations during preventive and evaluation and management visits.

The add-on code 99459 should be covered when accompanied with the following CPT codes:

* 99202 – 99205: Office or other outpatient visit for the evaluation and management of new patient
* 99212 – 99215: Office or other outpatient visit for the evaluation and management of established patient
* 99242 – 99245: Office or other outpatient consultation visit for new or established patient
* 99384 – 99387: Initial comprehensive preventive medicine, new patients
* 99396 – 99397: Periodic comprehensive preventive medicine, established patients

These services represent visits in which pelvic examinations may be performed and are not currently accounted for in CPT code valuation in your commercial population, despite ACOG guidance that [recommends indicated pelvic examinations](https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2018/10/the-utility-of-and-indications-for-routine-pelvic-examination) and [the use of a chaperone for all breast, genital, and rectal examinations](https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2020/01/sexual-misconduct).

[Insert personal experience/narrative here]

This policy is essential to improving access to safe, high quality, and evidence-based care for all patients and reducing health inequities. I respectfully request that your policies align with the most up-to-date national standards and recommendations, as indicated by ACOG and CMS.

Sincerely,

[sender name and credentials]