

ACCC Applauds Launch of New Billing Code for Genetic Counselors

BY RACHEL RADWAN



As a result of efforts by the National Society of Genetic Counselors and the American College of Medical Genetics and Genomics, a new CPT® code for genetic counselors will launch in January 2025. Under code 96041, billing will be based on the total time the genetic counselor spends with the patient on the date of the encounter.

An Important Step Forward

This new code represents an important shift in the landscape of genetic counseling. The existing CPT code 96040, which has been in use since it was first proposed in 2005, allowed reporting for 30-minute face-to-face genetic counseling sessions to be billed as a stackable 30-minute unit charge.¹ However, code 96041 better reflects the work genetic counselors do and does not have any time constraints. “The new 96041 code allows genetic counselors to be recognized for all the work they do for a patient on the day of the appointment outside of the physical appointment, and puts them in a better position to bill appropriately for their services,” commented Lindsey Byrne, MS, CGC, certified genetic counselor and clinical assistant professor of Internal Medicine at The Ohio State University Comprehensive Cancer Center.

Still, genetic counselors are not recognized nationally by the Centers for Medicare & Medicaid Services as health care providers, greatly inhibiting reimbursement opportunities. Some genetic counselors may bill a facility fee if they run a clinic independently, but smaller facilities often find it difficult to pay for a provider who cannot be directly reimbursed for their services, thus limiting the hiring of genetic counselors.


In order to provide patients with the genetic counseling services they need, many medical organizations and associations, including ACCC, have been advocating for the Access to Genetic Counselor Services Act for years.² Among other components, this act would give genetic counselors provider status under Medicare Part B, thus allowing direct reimbursement to genetic counselors for services furnished under Medicare Part B.

“The new genetic counseling CPT code is a big step in the right direction toward increasing patient access to genetic counseling,” said ACCC Board of Trustees Member Leigha Senter-Jamieson, MS, CGC, a licensed genetic counselor and clinical professor of Internal Medicine at The Ohio State University Comprehensive Cancer Center. “A great deal of work went into ensuring that the code accurately captures the specialized patient services that genetic counselors provide. Now, we just need the passage of the Access to Genetic Counselor Services Act to finally recognize genetic counselors as providers of this valuable service.”

An Unmet Need

With 5% to 10% of cancers being hereditary, the need for accessible genetic counseling services is greater than ever.³ Early identification of individuals with a hereditary cancer predisposition can improve surveillance and prevention efforts to save lives. From prevention and screening to treatment and survivorship, genetic counseling has been demonstrated to significantly improve patient outcomes⁴ and patient satisfaction. Unfortunately, over half of patients eligible for genetic counseling are not referred to the

appropriate services or do not have it offered to them.³ In some cases, this oversight is due to a lack of physician knowledge about ordering and interpreting genetic tests, as the results can be complex. Having a genetic counselor as part of the care team ensures that patients who stand to benefit from genetic testing are referred to the appropriate services, and that there is a health care provider uniquely trained to support patients through the complex process.⁵

The approval of code 96041 is an important milestone in ensuring genetic counselors are recognized for the vital work and services they provide for patients and reflects the longstanding dedication of the National Society of Genetic Counselors and the American College of Medical Genetics and Genomics. 

Rachel Radwan is an editorial coordinator at the Association of Cancer Care Centers.

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