

Bronchial Thermoplasty Awarded Category I CPT® Procedure Codes

New Bronchial Thermoplasty Procedure Codes Effective January 1, 2013

NATICK, Mass., Sept. 19, 2012 [/PRNewswire/](#) -- The American Medical Association (AMA) Current Procedural Terminology (CPT®¹) Editorial Panel has assigned Category I CPT codes specifically for bronchial thermoplasty in its recently published CPT 2013 Professional Edition. Beginning January 1, 2013, physicians and hospitals will be able to seek reimbursement through two new codes to describe the bronchial thermoplasty procedure. Category I CPT procedure codes are recognized by all public and private health insurance payers in the United States.

"The American Thoracic Society is pleased that starting January, 2013 physicians will have Category I CPT codes for coding and billing bronchial thermoplasty," said Monica Kraft, M.D., President, American Thoracic Society. "The ATS played a pivotal role in petitioning for the Category I CPT codes and we applaud the AMA CPT Editorial Panel for its decision to adopt the codes. The ATS notes several recent peer reviewed publications have indicated the safety and efficacy of bronchial thermoplasty in well-defined patient populations. We expect the Category I CPT codes will expand patient access to this new asthma therapy."

According to the AMA, criteria for a procedure to be awarded Category I CPT codes include:

- The suggested procedure/service is a distinct service performed by many physicians/practitioners across the United States; and
- The clinical efficacy of the service/procedure is well established and documented in U.S. peer-reviewed literature.²

"The CPT³ Editorial Panel's decision is not only a major reimbursement milestone for bronchial thermoplasty, but we believe it is also an indication of the strength of the clinical evidence and the tremendous support for the procedure amongst pulmonary physicians," said David Pierce, President, Boston Scientific Endoscopy. "These codes should provide greater access to treatment for patients with poorly controlled severe asthma, help facilitate easier claims processing, and help accelerate private payers' coverage of this much-needed treatment option."

The Alair® Bronchial Thermoplasty System is an FDA-approved device used in a bronchoscopic procedure performed under moderate sedation. The Alair System delivers thermal energy to the airway wall in a precisely controlled manner to reduce excessive airway smooth muscle. It is designed to decrease the ability of the airway to constrict, thereby reducing asthma attack frequency and severity for patients whose asthma is not well controlled with inhaled corticosteroids and long-acting beta-agonists. Clinical trial results, which have been published in multiple peer-reviewed articles, demonstrate safety out to five years and persistence of clinical benefit out to at least two years.

About Asthma

Asthma is one of the most common and costly diseases in the world. The prevalence of asthma has grown in recent decades, and there is no cure. According to the Asthma and Allergy Foundation of America, more than 20 million Americans have asthma. Managing asthma consumes more than \$18 billion of healthcare resources each year in the U.S. Uncontrolled asthma results in approximately 10 million unscheduled physician office visits, 2 million emergency rooms visits, 500,000 hospitalizations, and 4,000 deaths annually

in the United States. Approximately five percent of Americans suffering from asthma are diagnosed with severe persistent asthma.

About Boston Scientific

Boston Scientific is a worldwide developer, manufacturer and marketer of medical devices that are used in a broad range of interventional medical specialties. For more information, please visit:

www.bostonscientific.com.

Cautionary Statement Regarding Forward-Looking Statements

This press release contains forward-looking statements within the meaning of Section 27A of the Securities Act of 1933 and Section 21E of the Securities Exchange Act of 1934. Forward-looking statements may be identified by words like "anticipate," "expect," "project," "believe," "plan," "estimate," "intend" and similar words. These forward-looking statements are based on our beliefs, assumptions and estimates using information available to us at the time and are not intended to be guarantees of future events or performance. These forward-looking statements include, among other things, statements regarding markets for our products, reimbursement codes and their importance/impact, clinical trials and product performance. If our underlying assumptions turn out to be incorrect, or if certain risks or uncertainties materialize, actual results could vary materially from the expectations and projections expressed or implied by our forward-looking statements. These factors, in some cases, have affected and in the future (together with other factors) could affect our ability to implement our business strategy and may cause actual results to differ materially from those contemplated by the statements expressed in this press release. As a result, readers are cautioned not to place undue reliance on any of our forward-looking statements.

Factors that may cause such differences include, among other things: future economic, competitive, reimbursement and regulatory conditions; new product introductions; demographic trends; intellectual property; litigation; financial market conditions; and future business decisions made by us and our competitors. All of these factors are difficult or impossible to predict accurately and many of them are beyond our control. For a further list and description of these and other important risks and uncertainties that may affect our future operations, see Part I, Item 1A – *Risk Factors* in our most recent Annual Report on Form 10-K filed with the Securities and Exchange Commission, which we may update in Part II, Item 1A – *Risk Factors* in Quarterly Reports on Form 10-Q we have filed or will file hereafter. We disclaim any intention or obligation to publicly update or revise any forward-looking statements to reflect any change in our expectations or in events, conditions or circumstances on which those expectations may be based, or that may affect the likelihood that actual results will differ from those contained in the forward-looking statements. This cautionary statement is applicable to all forward-looking statements contained in this document.

¹ CPT Copyright 2012 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association. Applicable FARS/DFARS Restrictions Apply to Government Use. Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein.

² American Medical Association. CPT® Process - How a Code Becomes a Code. <http://www.ama-assn.org/ama/pub/physician-resources/solutions-managing-your-practice/coding-billing-insurance/cpt/cpt-process-faq/code-becomes-cpt.page> .

³ CPT copyright 2012 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.

CONTACT: Steven Campanini
508-652-5740 (office)
Media Relations
Boston Scientific Corporation
steven.campanini@bsci.com

Michael Campbell
508-650-8023 (office)
Investor Relations
Boston Scientific Corporation
investor_relations@bsci.com

SOURCE Boston Scientific Corporation

<https://news.bostonscientific.com/2012-09-19-Bronchial-Thermoplasty-Awarded-Category-I-CPT-Procedure-Codes>