



Related MLN Matters Article #: MM3755

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*Billing for Hemophilia Blood Clotting Factors (Medicare Claims Processing Manual (Pub. 100-04), Chapter 17, Section 80.4)*

### Key Words

CR3755, MM3755, Hemophilia, Blood, Clotting

### Provider Types Affected

Physicians and providers billing Medicare carriers and intermediaries for blood clotting factors

### Key Points

- The effective date for instruction is May 9, 2005
- Medicare **Carriers** – process claims for blood clotting factors from **non-institutional** providers
- Medicare **Fiscal Intermediaries (FIs)** – process claims for blood clotting factors from **institutional** providers (including claims from hospital-based hemophilia centers).
- **Blood clotting factors** are priced as a **drug/biological under the drug pricing fee schedule** effective for the specific date if service if they are **not** paid on a cost or prospective payment system basis.
- The Average Sales Price (ASP) plus 6% is used as of January 1, 2005.
- For beneficiaries in a covered **Part A** stay in a Prospective Payment System (PPS) hospital, clotting factors are paid in addition to the DRG/HIPPS payment. For FY 2005, this payment is based on 95% of Average Wholesale Prices (AWP).
- For a Skilled Nursing Facility (SNF) subject to SNF/PPS, the payment is bundled into the SNF/PPS rate.
- For beneficiaries covered under **Part B** in hospitals subject to the Outpatient Prospective Payment System, the clotting factors are paid based on an Ambulatory Payment Classification (APC).
- For SNFs, clotting factors are paid based on cost when paid under Part B.

## Important Links

MLN Matters article MM3755: <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM3755.pdf>

CR 3755 (transmittal #521): <http://www.cms.hhs.gov/transmittals/downloads/R521CP.pdf>