



Related MLN Matters Article #: MM3848

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Related CR #: 3848

Clarifying Manual Instructions for Coding and Payment for Drug Administration under the Hospital Outpatient Prospective Payment System (OPPS)

Keywords

MM3848, CR3848, R573CP, Drug, Administration, OPPS, Prospective, Hospital

Provider Types Affected

Physicians and providers billing services paid under the OPPS to Medicare Fiscal Intermediaries, including Regional Home Health Intermediaries

Key Points

- The effective date for the instruction is January 1, 2005.
- The implementation date is June 1, 2005.
- Change Request (CR) 3848 clarifies portions of Chapter 4, Section 230 in the *Medicare Claims Processing Manual* ("Billing and Payment for Drugs and Biologicals").
- The table on page 2 of MLN Matters article MM3848 lists various sub-sections that have been revised or created for this manual update.
- In addition to the clarifications, there are some examples to help providers better understand the drug administration policies. The examples further explain the following:
 - Administration of Chemotherapy Drugs by Infusion (Section 230.2.2);
 - Administration of Non-Chemotherapy Drugs by Infusion (Section 230.2.4);
 - Use of Modifier 59 (Section 230.2.6); and
 - Billing for Infusion Hours (Section 230.2.7).

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM3848.pdf> on the CMS website.

The official instruction (CR3848) regarding this change may be viewed at

<http://www.cms.hhs.gov/Transmittals/downloads/R573CP.pdf> on the CMS website.