



Related MLN Matters Article #: MM3911

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Related CR #: CR3911

Billing for the Administration of Drugs and Biologicals (specifically Low Osmolar Contrast Material (LOCM)) in a Method II Critical Access Hospital (CAH)

Key Words

Billing, Drug, Biological, CAH, LOCM, CR3911, MM3911, Osmolar, Contrast

Provider Types Affected

Method II CAHs billing Medicare Fiscal Intermediaries (FIs) for Low Osmolar Contrast Material (LOCM)

Key Points

- The effective date of the instruction is April 1, 2005.
- MM3911 provides clarification on the billing requirements for physician involvement in the administration of drugs and biologicals in the outpatient department of a Method II CAH.
- Both Method I (standard method) and Method II CAHs bill for technical services furnished in the outpatient department.
- Only Method II should bill for the outpatient physician involvement for the administration of LOCM with Revenue Code 96X, 97X or 98X on Type of Bill (TOB) 85X.
- Bills must include one of the HCPCS codes, Q9945-Q9951, as appropriate.
- The Medicare Physician Fee Schedule (MPFS) payment for these HCPCS codes is based upon the facility specific visit rate.
- The technical component for LOCM is billed by both Method I and Method II CAHs with Revenue Code 636 on TOB 85X and one of the HCPCS codes, A4644-A4646, as appropriate.

Important Links

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM3911.pdf>

<http://www.cms.hhs.gov/transmittals/downloads/R617CP.pdf>