



Related MLN Matters Article #: MM5867

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Billing Blood and Blood Products

Key Words

MM5867, CR5867, R1495CP, Blood

Provider Types Affected

All providers who submit claims for blood and blood products to Part A/B Medicare Administrative Contractors (A/B MACs), and Fiscal Intermediaries (FIs) for services provided to Medicare beneficiaries

Key Points

- The effective date of the instruction is October 1, 2008.
- The implementation date is October 6, 2008.
- Medicare does not pay for the first three units of whole blood or packed red cells that are furnished under Part A or Part B in a calendar year.
- The Part B blood deductible is reduced to the extent that it has been met under Part A and vice versa.
- The blood deductible does not apply to the costs of processing, storing, and administering blood.
- To meet the blood deductible, beneficiaries have the option of paying the hospital's charges for the blood or packed red cells or arranging for it to be replaced.
- Beneficiaries are not responsible for the blood deductible if the provider obtained the whole blood or packed red cells at no charge other than the processing charge.

Background

- The Centers for Medicare & Medicaid Services (CMS) became aware that inconsistencies exist among billing/claim processing requirements for blood services.
- Change Request (CR) 5867 instructs Medicare system maintainers to modify blood edits to align with existing Part A and hospital Part B policies for paying blood services and assigning blood deductible, as well as with current revenue code standards set by the National Uniform Billing Committee.
- Hospitals should report charges for red blood cells using revenue code 381 and charges for whole blood using revenue code 382. **Failure to report the correct revenue code will cause claims to be returned.**
- Revenue code 380 is not a valid revenue code for Medicare.

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5867.pdf> on the CMS website.

The official instruction (CR5867) regarding this change may be viewed at

<http://www.cms.hhs.gov/Transmittals/downloads/R1495CP.pdf> on the CMS website.