



Clarification for Billing Part B versus Part D for the Anti-emetic Aprepitant (Emend®) – JA0910

Related CR Release Date: N/A

Date Job Aid Revised: June 10, 2009

Effective Date: N/A

Implementation Date: N/A

Key Words SE0910, Anti-emetic, Aprepitant, Emend, Billing

Contractors Affected

- Fiscal Intermediaries (FIs)
- Part A/B Medicare Administrative Contractors (A/B MACs)
- Medicare Carriers
- Durable Medical Equipment MACs (DME MACs)

Provider Types Affected Providers and suppliers rendering services to beneficiaries with cancer chemotherapy-induced nausea and vomiting (CINV)



MLN Matters® article SE0910 clarifies how to determine if Part B or Part D should be billed for a drug regimen of Aprepitant (Emend®) when used to alleviate CINV.

Coverage of Emend® Under the Part B Program

Provider Needs to Know...

- Medicare Part B covers Emend® when used as part of the following regimen:
 - Emend® IV provided on day 1 would be covered under B. (Payment for Oral Emend® on days 2 and 3 would not be made under Part B but should be billed under Part D.).

-
-
- Days 1-3 of the oral anti-emetic 3-drug combination of Emend®, a 5-HT3 antagonist, and Dexamethasone.
 - This regimen acts as a full replacement for IV anti-emetic therapy for patients receiving one or more of the following anti-cancer chemotherapeutic agents:
 - Carmustine
 - Cisplatin
 - Cyclophosphamide
 - Dacarbazine
 - Doxorubicin
 - Epirubicin
 - Lomustine
 - Mechlorethamine
 - Streptozocin.

Coverage of Emend® Under the Part D Program

- The Part D program will generally cover Emend® when it is not prescribed in accordance with the above Medicare Part B coverage guidelines.
 - If Emend® IV is given on day 1, then oral Emend® is given on days 2-3. The oral Emend® must be billed to Part D.
 - To assist in billing of Emend®, CMS recommends physicians indicate on a prescription:
 - That the Emend® is being used as part of a CINV chemotherapeutic drug regimen;
 - What day of treatment the patient is on (e.g., post chemo day 2) and;
 - Whether the IV or oral form of the drug was given on day 1.
-
-

Background

- The Centers for Medicare & Medicaid Services (CMS) provides Part B reimbursement for oral anti-emetic drugs when used as a full therapeutic replacement for intravenous dosage forms as part of a cancer chemotherapeutic regimen, when the drugs are administered or prescribed by a physician for use immediately before, at, or within 48 hours after the time of administration of the chemotherapeutic agent.
 - Aprepitant (Emend®) is indicated for use as an anti-emetic for CINV when part of a three-drug combination regimen.
 - The three-drug combination is:
 - Aprepitant;
 - A 5-HT3 antagonist (e.g. granisetron, ondansetron, or dolasetron); and
 - Dexamethasone (a corticosteroid).
-
-

- The three-drug combination protocol requires the first regimen dose to be administered before, at, or immediately after the time of the anti-cancer chemotherapy administration.
- The second day (on which only Aprepitant is given) is defined as “within 24 hours” of the chemotherapy administration.
- The third day, on which again only Aprepitant is given, is defined as “within 48 hours” of the chemotherapy administration.
- These drugs may be supplied by the physician in the office, by an inpatient or outpatient provider (e.g., hospital, critical access hospital, or skilled nursing facility), or through a supplier, such as a pharmacy.
- The physician must indicate on the prescription that the beneficiary is receiving the oral anti-emetic drug as full therapeutic replacement for an intravenous anti-emetic drug as part of a cancer chemotherapeutic regimen in order for the beneficiary to receive coverage under Part B.
- Where the drug is provided by a facility, the beneficiary’s medical record maintained by the facility must be documented to reflect that the beneficiary is receiving the oral anti-emetic drug as full therapeutic replacement for an intravenous anti-emetic drug as part of a cancer chemotherapeutic regimen.
- **All three drugs in the combination oral anti-emetic regimen must be on the same claim to be eligible for Part B reimbursement**
- CMS has received questions regarding the billing Aprepitant when used as a complete replacement for intravenous therapy or as a completion of a 48-hour regimen where IV Aprepitant is given the day of chemotherapy and the oral medication is given days 2-3 of therapy.
- CMS is providing information in response to these questions.

Operational Impact	N/A
-----------------------	-----

Reference Materials	<p>The related MLN Matters® article can be found at http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0910.pdf on the CMS website.</p> <p>Providers may find additional information on this issue in the MLN Matters® article MM5655 at http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5655.pdf on the CMS website.</p>
------------------------	--
