

Related Change Request (CR) #: 3312

MLN Matters Number: MM3312

Related CR Release Date: June 25, 2004

Related CR Transmittal #: 90

Effective Date: January 1, 2004

Implementation Date: July 25, 2004

Drug Pricing Update—Payment Limits for J7308 (Levulan Kerastick) and J9395 (Faslodex)

Note: This article was updated on May 9, 2013, to reflect current Web addresses. All other information remains unchanged.

Provider Types Affected

Physicians, suppliers, and providers

Provider Action Needed



STOP – Impact to You

New payment limits have been set for HCPCS drug codes J7308 (Levulan Kerastick) and J9395 (Faslodex) when these codes are not paid on a cost or prospective payment basis.



CAUTION – What You Need to Know

Medicare Carriers are instructed to replace the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) payment limits for HCPCS drug codes J7308 (Levulan Kerastick) and J9395 (Faslodex) with the new rates listed in this instruction for dates of service on or after January 1, 2004.



GO – What You Need to Do

Be aware of the new payment limits for these two codes.

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Background

This article informs providers that Medicare carriers will apply new payment limits for these HCPCS codes (J7308 (Levulan Kerastick) and J9395 (Faslodex)) for claims processed with dates of service on or after January 1, 2004 and on or before December 31, 2004.

From January 1, 2004 through December 31, 2004, the Medicare payment limits for the specific HCPCS drug codes listed below (that are not paid on a cost or prospective payment basis) apply.

| HCPCS | Short Description | Average Wholesale Price (AWP) % | 2004 Payment Limit for Drugs (other than End Stage Renal disease (ESRD) drugs separately billed by independent ESRD Facilities and drugs infused through Durable Medical Equipment (DME) |
|-------|-----------------------------|---------------------------------|--|
| J7308 | Aminolevulinic acid hcl top | 85 | \$ 111.47 |
| J9395 | Injection, Fulvestrant | 85 | \$ 81.57 |

Note: The payment limits listed in the table above supercede the payment limits published in Change Request 3105 (Transmittal 75) dated January 30, 2004, only for these particular HCPCS drug codes for this time period. Also note that the absence or presence of an HCPCS code and its associated payment limit does not indicate Medicare coverage of the drug.

Implementation

The implementation date for this instruction is July 25, 2004. The effective date of the change is January 1, 2004. However, Medicare contractors will not adjust any claims previously processed in order to apply these new payment limits unless the provider requests such an adjustment.

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