

Related Change Request (CR) #: 3745

MLN Matters Number: MM3745

Related CR Release Date: March 18, 2005

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Effective Date: April 1, 2005

Implementation Date: April 4, 2005

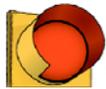
**Note:** This article was updated on February 4, 2013, to reflect current Web addresses. All other information remains unchanged.

## *New HCPCS Codes for Intravenous Immune Globulin (IVIG)*

### Provider Types Affected

Physicians, providers, and suppliers billing Medicare for IVIG

### Provider Action Needed



#### **STOP – Impact to You**

New HCPCS codes for IVIG will be effective April 1, 2005.



#### **CAUTION – What You Need to Know**

Effective April 1, 2005, for dates of service on or after April 1, 2005, codes J1563 and J1564 will no longer be paid by Medicare Fiscal Intermediaries (FIs) and carriers, including Durable Medical Equipment Regional Carriers (DMERCs). Codes J1563 and J1564 will be replaced with HCPCS codes Q9941 – Q9944.



#### **GO – What You Need to Do**

These new HCPCS codes are needed to appropriately distinguish between the lyophilized and non-lyophilized form of IVIG. Be sure to bill the new codes when providing these services.

### Additional Information

Effective April 1, 2005, the following codes are being added to the Healthcare Common Procedure Coding System (HCPCS) to appropriately distinguish between the lyophilized and non-lyophilized form of IVIG.

#### Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

HCPCS Code	Short Descriptor	Long Descriptor
Q9941	IVIG lyophil 1G	INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, LYOPHILIZED, 1G
Q9942	IVIG lyophil 10 MG	INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, LYOPHILIZED, 10 MG
Q9943	IVIG non-lyophil 1G	INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, NON-LYOPHILIZED, 1G
Q9944	IVIG non-lyophil 10 MG	INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, NON-LYOPHILIZED, 10 MG

- Based on the above table, providers must bill Q9941 or Q9943, as appropriate, in place of J1563. Similarly, those providers should bill Q9942 or Q9944, as appropriate, instead of J1564.
- Payments for the new Q-codes can be found in the respective quarterly Medicare Part B drug pricing files posted on the CMS web site at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice/index.html> on the CMS website.
- The Medicare Outpatient Code Editor (OCE) will be updated to include these coding changes upon installation of the April 2005 software version 6.1.
- The Outpatient Prospective Payment System (OPPS) for the new Q codes can be found in the April update of OPPS Addendum A and Addendum B on the hospital outpatient web site. OPPS payment is based on the Ambulatory Payment Classification (APC).
- Coverage requirements for IVIG can be found in Chapter 15 of the Medicare Benefit Policy Manual. Additional information on IVIG may be found in Chapter 17 (Drugs and Biologicals), Section 80.6 of the Medicare Claims Processing Manual at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c17.pdf> on the CMS website.
- The official instruction issued to your carrier regarding this change may be found at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R507CP.pdf> on the CMS website.
- For additional information relating to this issue, please refer to your local carrier or FI. You may find the toll free phone number for your local carrier at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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