

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



News Flash – The “Medicare Overpayment Collection Process” fact sheet, which includes the definition of a physician or supplier overpayment and information about the overpayment collection process, has been revised and is now available in downloadable format at <http://www.CMS.gov/MLNProducts/downloads/OverpaymentBrochure508-09.pdf> on the Centers for Medicare & Medicaid Services (CMS) website

MLN Matters® Number: MM7547 **Revised**

Related Change Request (CR) #: 7547

Related CR Release Date: September 15, 2011

Effective Date: October 1, 2011

Related CR Transmittal #: R2305CP

Implementation Date: October 3, 2011

October 2011 Update of the Ambulatory Surgery Center (ASC) Payment System

Note: This article was revised on September 19, 2011, to reflect a revised CR7547. The CR was revised to correct the title of Table 1 and related references. Also, the CR transmittal number, release date, and the Web address for accessing the CR were changed. All other information remains the same.

Provider Types Affected

This article is for Ambulatory Surgery Centers (ASCs), who submit claims to Medicare Administrative Contractors (MACs) and carriers, for services provided to Medicare beneficiaries paid under the ASC payment system.

Provider Action Needed

This article is based on Change Request (CR) 7547 which describes changes to, and billing instructions for, payment policies implemented in the October 2011 ASC payment system update.

CR7547 provides information regarding three newly created Healthcare Common Procedure Coding System (HCPCS) codes that will be added to the ASC list of covered ancillary services effective October 1, 2011. No new HCPCS codes are

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being added to the ASC list of covered surgical procedures for October 1, 2011. Be sure your billing staff is aware of these changes.

Background

Medicare policy under the revised ASC payment system requires that ASC payment rates for covered separately payable drugs and biologicals be consistent with the payment rates under the Medicare Hospital Outpatient Prospective Payment System (OPPS). Those rates are updated on a quarterly basis.

Key Points of CR7547

New Category II CPT Codes Separately Payable under the ASC Payment System Effective October 1, 2011

Two new Category II CPT Codes have been created for payable surgical procedures that are payable for dates of service on and after October 1, 2011. The new HCPCS codes, the long descriptors, the short descriptors, and payment indicators are identified in below in Table 1

Table 1—Category Level II Codes Effective October 1, 2011

HCPCS Code	Long Descriptor	Short Descriptor	Payment Indicator (PI) Effective 10/1/2011
C1830	Powered bone marrow biopsy needle	Powered bone marrow bx needle	J7
C1840	Lens, intraocular (telescopic)	Telescopic intraocular lens	J7

One new drug and biological has been granted ASC payment status effective October 1, 2011. This item, along with the long and short descriptor, and payment indicator is identified in Table 2 below.

Table 2—New Drug and Biological Separately Payable under the ASC Payment System Effective October 1, 2011

HCPCS Code	Long Descriptor	Short Descriptor	ASC PI
C9286	Injection, belatacept, 1 mg	Injection, belatacept	K2

NOTE: HCPCS code C9286 is a new code effective October 1, 2011.

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Updated Payment Rate for HCPCS Code J9185 Effective July 1, 2011 through September 30, 2011

The payment rate for HCPCS code J9185 (Fludarabine phosphate inj) was incorrect in the July 2011 ASC Drug file. The corrected payment rate is listed in Table 3 below and has been included in the revised July 2011 ASC DRUG file effective for services furnished on July 1, 2011, through implementation of the October 2011 update. Suppliers who think they may have received an incorrect payment between July 1, 2011, and September 30, 2011, may request contractor adjustment of the previously processed claims.

Table 3 – Updated Payment Rates for HCPCS Code J9185 Effective July 1, 2011, through September 30, 2011

HCPCS Code	Short Descriptor	ASC Payment	ASC PI
J9185	Fludarabine phosphate inj	\$104.52	K2

Additional Information

If you have questions, please contact your Medicare MAC or FI at their toll-free number which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the Centers for Medicare & Medicaid Services (CMS) website.

The official instruction (CR7547) issued to your Medicare MAC and/or carrier is available at <http://www.cms.gov/Transmittals/downloads/R2305CP.pdf> on the CMS website. CMS also reminds ASCs that HCPCS payment updates are posted quarterly at http://www.cms.gov/ASCPayment/11_Addenda_Updates.asp#TopOfPage on the CMS website.

News Flash – Vaccinate Early to Protect Against the Flu. The Centers for Disease Control and Prevention (CDC) recommends a yearly flu vaccination as the first and most important step in protecting against flu viruses. Remind your patients that annual vaccination is recommended for optimal protection. Medicare pays for the flu vaccine and its administration for seniors and other Medicare beneficiaries with no co-pay or deductible. Take advantage of each office visit and start protecting your patients as soon as your 2011-2012 seasonal flu vaccine arrives. And, don't forget to immunize yourself and your staff. **Get the Flu Vaccination -- Not the Flu. Remember –** Influenza vaccine plus its administration are covered Part B benefits. Note that influenza vaccine is NOT a Part D covered drug. For information about Medicare's coverage of the influenza vaccine and its administration, as well as related educational resources for health care professionals and their staff, please visit http://www.cms.gov/MLNProducts/35_PreventiveServices.asp on the Centers for Medicare & Medicaid Services (CMS) website.

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