

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



News Flash –

REVISED product from the Medicare Learning Network® (MLN)

- [“Preventive Immunizations,”](#) Booklet, ICN 907787, Downloadable only.

MLN Matters® Number: MM8116

Related Change Request (CR) #: CR 8116

Related CR Release Date: October 26, 2012

Effective Date: January 1, 2013

Related CR Transmittal #: R2568CP

Implementation Date: January 7, 2013

January 2013 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files

Provider Types Affected

This MLN Matters® Article is intended for physicians, providers, and suppliers submitting claims to Medicare contractors (carriers, Fiscal Intermediaries (FIs), A/B Medicare Administrative Contractors (A/B MACs), Durable Medical Equipment Medicare Administrative Contractors (DME MACs), and/or Regional Home Health Intermediaries (RHHIs)) for services provided to Medicare beneficiaries.

Provider Action Needed



STOP – Impact to You

Medicare will use the January 2013 quarterly Average Sales Price (ASP) Medicare Part B drug pricing files to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after January 1, 2013, with dates of service from January 1, 2013, through March 31, 2013.

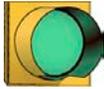
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CAUTION – What You Need to Know

Change Request (CR) 8116, from which this article is taken, instructs your Medicare Contractors to download and implement the January 2013 Average Sales Price (ASP) Medicare Part B drug pricing file for Medicare Part B drugs and, if released by the Centers for Medicare & Medicaid Services (CMS), to also download and implement the revised January 2013, October 2012, July 2012, April 2012, and January 2012 files.



GO – What You Need to Do

Please ensure that your staffs are aware of this January 2013 quarterly update. Contractors will not search and adjust claims that have already been processed unless brought to their attention.

Background

The Average Sales Price (ASP) methodology is based on quarterly data submitted to CMS by manufacturers. CMS will supply Medicare contractors with the ASP and Not Otherwise Classified (NOC) drug pricing files for Medicare Part B drugs on a quarterly basis. Payment allowance limits under the Outpatient Prospective Payment System (OPPS) are incorporated into the Outpatient Code Editor (OCE) through separate instructions that can be located in the "Medicare Claims Processing Manual" (Chapter 4 (Part B Hospital (Including Inpatient Hospital Part B and OPPS)), Section 50 (Outpatient PRICER); see <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c04.pdf> on the CMS website.)

The following table shows how the quarterly payment files will be applied:

| Files | Effective for Dates of Service |
|------------------------------|--|
| January 2013 ASP and ASP NOC | January 1, 2013, through March 31, 2013 |
| October 2012 ASP and ASP NOC | October 1, 2012, through December 31, 2012 |
| July 2012 ASP and ASP NOC | July 1, 2012, through September 30, 2012 |
| April 2012 ASP and ASP NOC | April 1, 2012, through June 30, 2012 |
| January 2012 ASP and ASP NOC | January 1, 2012, through March 31, 2012 |

Additional Information

You can find the official instruction, CR8116, issued to your FI, carrier, A/B MAC, RHHI, or DME MAC by visiting <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R2568CP.pdf> on the CMS website.

If you have any questions, please contact your FI, carrier, A/B MAC, RHHI, or DME MAC at their toll-free number, which may be found 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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