



News Flash - Medicare Disproportionate Share Hospital Fact Sheet Available

The revised (March 2007) *Medicare Disproportionate Share Hospital Fact Sheet*, which provides information about methods to qualify for the Medicare Disproportionate Share Hospital (DSH) adjustment and Medicare DSH payment adjustment formulas, is now available on the CMS Medicare Learning Network at http://www.cms.gov/MLNProducts/downloads/2007_mdsh.pdf on the CMS website.

MLN Matters Number: MM5466 **Revised**

Related Change Request (CR) #: 5466

Related CR Release Date: April 27, 2007

Effective Date: January 1, 2007

Related CR Transmittal #: R1234CP

Implementation Date: October 2, 2007

Update of HCPCS Codes for Hemophilia Clotting Factors

Note: This article was updated on August 27, 2012, to reflect current Web addresses. This article was also revised on July 27, 2007 to correct the HCPCS code mentioned in the CAUTION and Background sections of the article. It incorrectly referenced J1787. It should have referenced J7187, as in the rest of the article. All other information remains the same.

Provider Types Affected

Providers who submit claims to Medicare fiscal intermediaries (FIs) and Part A/B Medicare Administrative Contractors (A/B MACs) for hemophilia clotting factors.

Provider Action Needed

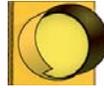


STOP – Impact to You

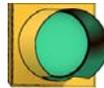
Discontinue the use of HCPCS code J7188, injection, vonWillebrand factor complex, human, ristocetin cofactor, per IU, effective for discharges after December 31, 2006.

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.

**CAUTION – What You Need to Know**

Providers are to use the new HCPCS code, J7187, injection, vonWillebrand factor complex, human, ristocetin cofactor, per IU, effective with dates of discharge January 1, 2007. However, Medicare systems will not be ready to process J7187 until October 1, 2007. Claims submitted with J7187 prior to the October 1, 2007, implementation date will be returned to the provider (RTP).

**GO – What You Need to Do**

Be sure billing staff are aware of this change and of how to handle related claims until Medicare systems are updated on October 1, 2007. The background section of this article provides instructions for handling this issue until October 1, 2007.

Background

Effective for dates of discharge on or after January 1, 2007, providers should use the new HCPCS code of J7187 for appropriate hemophilia clotting factors. However, as mentioned, Medicare systems will not be ready to process the J7187 code until October 1, 2007. Thus, for claims submitted from January 1, 2007 through September 30, 2007 (and for dates of discharge on or after January 1, 2007), hospitals should take the following steps:

- For claims for hospital inpatient care, omit the J7187 code from the claim.
- Once payment has been received for the inpatient claim, immediately submit an adjustment request (type of bill 117), including the J7187 code on the adjustment.
- Once Medicare systems are ready to process the J7187 code, the adjustment will process automatically.

With the exception of the adjustment requests just mentioned, Medicare will return claims containing J7187 with dates of discharge on or after January 1, 2007, which are received prior to the October 1, 2007, implementation date.

Providers should note that this does not impact payment of outpatient claims, or skilled nursing facility claims. However, claims paid under the inpatient psychiatric facility (IPF) prospective payment system will also need to omit J7187 as noted above and IPF providers should follow the above instructions.

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Additional Information

If you have questions, please contact your Medicare A/B MAC or FI 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.

CR5466 is the official instruction issued to your Medicare A/B MAC or FI on this issue. That instruction may be viewed by going to <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1234CP.pdf> on the CMS website.

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