

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



REVISED products from the Medicare Learning Network<sup>®</sup> (MLN)

- [“Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse”](#), Booklet (ICN 907798) EPUB, QR

MLN Matters<sup>®</sup> Number: MM8748

Related Change Request (CR) #: CR 8748

Related CR Release Date: April 25, 2014

Effective Date: July 1, 2014

Related CR Transmittal #: R2936CP

Implementation Date: July 7, 2014

## July 2014 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files

### Provider Types Affected

This MLN Matters<sup>®</sup> Article is intended for physicians, providers, and suppliers who submit claims to Medicare Administrative Contractors (MACs), including Durable Medical Equipment Medicare Administrative Contractors (DME MACs), and/or Home Health and Hospices (HH&H) MACs for services provided to Medicare beneficiaries.

### Provider Action Needed

MACs will use the July 2014 Average Sales Price (ASP) and not otherwise classified (NOC) drug pricing files to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2014, with dates of service July 1, 2014, through September 30, 2014.

Change Request (CR) 8748, from which this article is taken, instructs MACs to implement the July 2014 ASP Medicare Part B drug pricing file for Medicare Part B drugs, and if they are released by the Centers for Medicare & Medicaid Services (CMS), to also implement the

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revised April 2014, January 2014, October 2013, and July 2013 ASP drug pricing files. Make sure your billing personnel are aware of these changes.

## Background

The ASP methodology is based on quarterly data submitted to the Centers for Medicare & Medicaid Services (CMS) by manufacturers. CMS supplies the MACs with the ASP and 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, Section 50 (Outpatient PRICER)) at <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
July 2014 ASP and ASP NOC	July 1, 2014, through September 30, 2014
April 2014 ASP and ASP NOC	April 1, 2014, through June 30, 2014
January 2014 ASP and ASP NOC	January 1, 2014, through March 31, 2014
October 2013 ASP and ASP NOC	October 1, 2013, through December 31, 2013
July 2013 ASP and ASP NOC	July 1, 2013, through September 30, 2013

## Additional Information

The official instruction, CR 8748 issued to your MAC regarding this change may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R2936CP.pdf> on the CMS website.

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