**News Flash** – A Special Edition MLN Matters provider education article is now available at [http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/SE0904.pdf](http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/SE0904.pdf) on the CMS website. This Special Edition article alerts providers regarding the implementation of HIPAA 5010 which presents substantial changes in the content of the data that providers submit with their claims as well as the data available to them in response to their electronic inquiries and outlines how providers need to plan for implementation of these changes.

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**Note:** This article was updated on January 25, 2013, to reflect current Web addresses. All other information remains unchanged.

### Clarification for Billing Part B versus Part D for the Anti-emetic Aprepitant (Emend®)

**Provider Types Affected**

Providers and suppliers rendering services to beneficiaries with cancer chemotherapy-induced nausea and vomiting (CINV)

**Provider Action Needed**

This article describes the Centers for Medicare & Medicaid Services (CMS) policy distinguishing Part B versus Part D billing for the anti-emetic medication aprepitant (Emend®) for chemotherapy induced nausea-vomiting (CINV). Be sure your billing staff is aware of this information.

**Issue**

How to determine if Part B or Part D should be billed for a drug regimen of aprepitant when used to alleviate chemotherapy induced nausea-vomiting.

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complete replacement for intravenous therapy or as a completion of a 48-hour regimen where IV aprepitant is given the day of chemotherapy and the oral medication is given days 2-3 of therapy. This article provides information in response to these questions.

**Background**

CMS provides Part B reimbursement for oral anti-emetic drugs when used as a full therapeutic replacement for intravenous dosage forms as part of a cancer chemotherapeutic regimen, when the drugs are administered or prescribed by a physician for use immediately before, at, or within 48 hours after the time of administration of the chemotherapeutic agent. Aprepitant (Emend®) is indicated for use as an anti-emetic for CINV when part of a three drug combination regimen. The three-drug combination is:

- Aprepitant;
- A 5-HT3 antagonist (e.g. granisetron, ondansetron, or dolasetron); and
- Dexamethasone (a corticosteroid).

The three drug combination protocol requires the first regimen dose to be administered before, at, or immediately after the time of the anti-cancer chemotherapy administration. The second day, on which only aprepitant is given, is defined as “within 24 hours,” and the third day, on which again only aprepitant is given, is defined as “within 48 hours” of the chemotherapy administration. These drugs may be supplied by the physician in the office, by an inpatient or outpatient provider (e.g., hospital, critical access hospital, or skilled nursing facility), or through a supplier, such as a pharmacy.

The physician must indicate on the prescription that the beneficiary is receiving the oral anti-emetic drug as full therapeutic replacement for an intravenous anti-emetic drug as part of a cancer chemotherapeutic regimen in order for the beneficiary to receive coverage under Part B. Where the drug is provided by a facility, the beneficiary’s medical record maintained by the facility must be documented to reflect that the beneficiary is receiving the oral anti-emetic drug as full therapeutic replacement for an intravenous anti-emetic drug as part of a cancer chemotherapeutic regimen. **All three drugs in the combination oral anti-emetic regimen must be on the same claim to be eligible for Part B reimbursement.**

**Coverage of Emend Under the Part B Program**

Medicare Part B covers Emend when used as part of the following regimen:
• IV Emend provided on day 1 would be covered under B. (Payment for Oral Emend on days 2 and 3 would not be made under Part B but should be billed under Part D.)

• Days 1-3 of the oral anti-emetic 3-drug combination of Emend, a 5-HT3 antagonist, and dexamethasone. This regimen acts as a full replacement for IV anti-emetic therapy for patients receiving one or more of the following anti-cancer chemotherapeutic agents:
  • Carmustine
  • Cisplatin
  • Cyclophosphamide
  • Dacarbazine
  • Doxorubicin
  • Epirubicin
  • Lomustine
  • Mechlorethamine
  • Streptozocin

**Coverage of Emend Under the Part D Program**
The Part D program will generally cover Emend when it is not prescribed in accordance with the above Medicare Part B coverage guidelines. If Emend IV is given on Day 1, then oral Emend is given on days 2-3, the oral Emend must be billed to Part D. To assist in billing of Emend, CMS recommends physicians indicate on a prescription that the Emend is being used as part of a CINV chemotherapeutic drug regimen, what day of treatment the patient is on (e.g. Post chemo Day 2) and whether the IV or oral form of the drug was given on Day 1.

**Additional Information**


If you have questions on the proper billing of aprepitant, contact your Medicare Carrier, Fiscal Intermediary, or Medicare Administrative Contractor at their toll free number, which is available at [http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html](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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