PROVIDER COMPLIANCE TIPS FOR IMMUNOSUPPRESSIVE DRUGS

PROVIDER TYPES AFFECTED
Physicians and Non-Physician Practitioners (NPPs) who write prescriptions for immunosuppressive drugs

BACKGROUND
For the 2017 reporting period, the Medicare Fee-For-Service improper payment rate for immunosuppressive drugs was 27.6 percent, representing a projected improper payment amount of $93.5 million.

REASONS FOR DENIALS
For the 2017 reporting period, insufficient documentation accounted for 57.4 percent of improper payments for immunosuppressive drugs.

Additional types of errors for immunosuppressive drugs were no documentation (1.4 percent), incorrect coding (0.3 percent), and other (40.9 percent).

TO PREVENT DENIALS
Medicare covers prescription drugs used for immunosuppressive therapy after meeting all of the following criteria:

1. A drug or drugs are prescribed following a transplant:
   a. Kidney, heart, liver, bone marrow/stem cell, lung, or heart/lung transplant
   b. Whole organ pancreas transplant performed concurrent with or subsequent to a kidney transplant because of diabetic nephropathy (performed on or after July 1, 1999)
   c. Intestinal transplant (performed on or after April 1, 2001)
   d. Pancreatic islet cell transplant or partial pancreatic tissue transplantation (performed on or after October 1, 2004), conducted as part of a National Institutes of Health-sponsored trial
   e. Pancreas transplants alone (performed on or after April 26, 2006) meeting 6 criteria listed in Local Coverage Article: Immunosuppressive Drugs-Policy Article (A52474)

2. Transplant met Medicare coverage criteria in effect at the time

3. Patient was eligible for Medicare Part A at the time of the transplant

4. Patient is enrolled in Medicare Part B at the time that the drug is dispensed

5. Furnish drugs on or after the date of discharge from the hospital following a covered organ transplant
Consider the following factors when submitting immunosuppressive drug claims to Medicare:

- Immunosuppressive drugs require the dosage, frequency, and route of administration and must conform to generally accepted medical practice and be medically necessary to prevent or treat the rejection of an organ transplant.
- The quantity of immunosuppressive drugs dispensed is limited to a 30-day supply.

Include the following elements with submitted documentation to meet Medicare FFS coverage requirements for Immunosuppressive drug claims:

1. Dispensing order
2. Detailed written order
3. Beneficiary authorization
4. Refill requirements
   - Contact to the beneficiary regarding the refills must take place no sooner that 14 days prior to delivery/shipping date.
   - For delivery of refills, the supplier must deliver the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) product no sooner that 10 calendar days prior to the end of usage for the current product.
5. Proof of delivery
6. Proof of continued need
7. Proof of continued use

The following resources may be helpful to physicians, and suppliers in understanding Medicare’s policies regarding immunosuppressive drugs:

Medicare Claims Processing Manual 100-4, Chapter 17, Section 80.3

Medicare Benefit Policy Manual, Publication 100-2, Chapter 15, Section 50.4.3
# RESOURCES

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<thead>
<tr>
<th>FOR MORE INFORMATION ABOUT...</th>
<th>RESOURCE</th>
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<tbody>
<tr>
<td>The 2017 Medicare Fee-For-Service Supplemental Improper Payment Data</td>
<td><a href="https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/CERT/CERT-Reports-Items/2017-Medicare-FFS-Payment-Data.html?DLPage=1&amp;DLEntries=10&amp;DLSort=0&amp;DLSortDir=descending">https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/CERT/CERT-Reports-Items/2017-Medicare-FFS-Payment-Data.html?DLPage=1&amp;DLEntries=10&amp;DLSort=0&amp;DLSortDir=descending</a></td>
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<tr>
<td>Local Coverage Article: Immunosuppressive Drugs-Policy Article (A52474)</td>
<td><a href="https://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=52474&amp;ver=13&amp;NC-Dld=280&amp;ncdver=2&amp;SearchType=Advanced-CoverageSelection=Both&amp;NCSelection=NCA%7cCAL%7cNCD%7cMEDCAC%7cTA%7cMCD&amp;Article-Type=Ed%7cKey%7cSAD%7cFAQ&amp;PolicyType=Final&amp;s=-%7c5%7c6%7c66%7c67%7c9%7c38%7c63%7c41%7c64%7c65%7c44&amp;KeyWord=transplant&amp;KeyWordLookUp=Doc&amp;KeyWordSearchType=Exact&amp;kq=true&amp;bc=IAAAACAAAAAAA%3d%3d&amp;">https://www.cms.gov/medicare-coverage-database/details/article-details.aspx?articleId=52474&amp;ver=13&amp;NC-Dld=280&amp;ncdver=2&amp;SearchType=Advanced-CoverageSelection=Both&amp;NCSelection=NCA%7cCAL%7cNCD%7cMEDCAC%7cTA%7cMCD&amp;Article-Type=Ed%7cKey%7cSAD%7cFAQ&amp;PolicyType=Final&amp;s=-%7c5%7c6%7c66%7c67%7c9%7c38%7c63%7c41%7c64%7c65%7c44&amp;KeyWord=transplant&amp;KeyWordLookUp=Doc&amp;KeyWordSearchType=Exact&amp;kq=true&amp;bc=IAAAACAAAAAAA%3d%3d&amp;</a></td>
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