
Program Memorandum Intermediaries

Department of Health and
Human Services (DHHS)
HEALTH CARE FINANCING
ADMINISTRATION (HCFA)

Transmittal A-00-48

Date: AUGUST 3, 2000

CHANGE REQUEST 1304

SUBJECT: Drugs, Biologicals, Devices and New Technology HCFA Common Procedure Coding System (HCPCS) Codes For Use Under the Hospital Outpatient Prospective Payment System (OPPS)

Under OPPS, hospitals will receive pass-through payments, in addition to payments under the appropriate ambulatory payment classifications (APCs), for eligible drugs, biologicals, and devices. Hospitals will also receive payment for certain items and services under the new technology APCs established under OPPS. Program Memorandum Transmittal No. A-00-42, dated July 2000, provided coding information related to items eligible for pass-through payments and payment under the new technology APCs, as well as other coding information related to OPPS. The PM included a list of new HCPCS codes, and their associated long descriptors, that hospitals will use when billing eligible drugs, biologicals, devices and new technology APCs under OPPS.

The Outpatient Code Editor and PRICER currently contain these codes. However, they need to be added to the HCPCS file in your internal claims processing system. The codes are currently available for immediate retrieval via HCFA's mainframe telecommunication system under the following file name:

Data	MU00.@AAA2360.HCPC0800.CONTR
Print	MU00.@AAA2360.HCPC0800.PRINT

All of the C-codes included in this file are used exclusively for services paid under the OPPS and may **not** be used to bill services paid under other Medicare payment systems.

Refer to Transmittal No. A-00-36 issued June 2000, regarding application of the deductible and coinsurance to codes contained in this HCPCS file. Coinsurance is not applied to the additional payment allowed under the transitional pass-through provision. Therefore, some codes included in this PM are not subject to coinsurance payments. As stated in Transmittal No. A-00-36, the PRICER will calculate the deductible and coinsurance, if applicable, for billed services.

The *effective date* for this Program Memorandum (PM) is August 1, 2000.

The *implementation date* for this PM is August 14, 2000.

These instructions should be implemented within your current operating budget.

This PM may be discarded after August 1, 2001.

If you have any questions, contact your local regional office.

HCFA-Pub. 60A