

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3518	Date: May 6, 2016
	Change Request 9636

SUBJECT: Quarterly Healthcare Common Procedure Coding System (HCPCS) Drug/Biological Code Changes - July 2016 Update

I. SUMMARY OF CHANGES: The HCPCS code set is updated on a quarterly basis. This instruction informs the contractors of updating specific drug/biological HCPCS codes.

Beginning on July 1, 2016, the following HCPCS codes will be established.

Q9981 rolapitant, oral, 1mg

Q9982 flutemetamol f18 diagnostic

Q9983 florbetaben f18 diagnostic

Q5102 Inj., infliximab biosimilar (effective April 5, 2016)

Also, beginning on July 1, 2016 following HCPCS modifier will be established with an effective date of April 5, 2016.

ZB Pfizer/hospira

EFFECTIVE DATE: July 1, 2016

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: July 5, 2016

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	N/A

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to

be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Recurring Update Notification

Attachment - Recurring Update Notification

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EFFECTIVE DATE: July 1, 2016

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: July 5, 2016

I. GENERAL INFORMATION

A. Background: The HCPCS code set is updated on a quarterly basis. The July 2016 HCPCS file includes four new HCPCS codes, Q9981 rolapitant, oral, 1mg, Q9982 flutemetamol f18 diagnostic, Q9983 florbetaben f18 diagnostic and Q5102 Inj., infliximab biosimilar. Also, the July 2016 HCPCS file includes a new HCPCS modifier, ZB Pfizer/hospira.

Please note that Q5102 Inj., infliximab biosimilar code is effective April 5, 2016. Also, beginning on July 1, 2016, the ZB HCPCS modifier will be established with an effective date of April 5, 2016.

B. Policy: Effective for claims with dates of service on or after July 1, 2016, HCPCS code Q9981, Q9982, and Q9983 will be payable for Medicare:

HCPCS Code: Q9981

Short Description: rolapitant, oral, 1mg

Long Description: Rolapitant, oral, 1 mg

TOS Code: 1

HCPCS Code: Q9982

Short Description: flutemetamol f18 diagnostic

Long Description: Flutemetamol F18, diagnostic, per study dose, up to 5 millicuries

TOS Code: 4

HCPCS Code: Q9983

Short Description: florbetaben f18 diagnostic

Long Description: Florbetaben f18, diagnostic, per study dose, up to 8.1 millicuries

TOS Code: 4

Number	Requirement	Responsibility								
		A/B MAC			D M E M A C	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
	for dates of service on or after July 1, 2016.									
9636.6	The Common Working File (CWF) shall use categories 60 and 17 for Q5102 for dates of service on or after April 5, 2016.								X	
9636.7	For dates of service on or after April 5, 2016, Contractors shall require the following modifier when HCPCS code Q5102 is billed on a claim: ZB: Pfizer/hospira	X	X	X	X					IOCE

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
9636.8	MLN Article: A provider education article related to this instruction will be available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within 5 business days after receipt of the notification from CMS announcing the availability of the article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.	X	X	X	X	

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements:

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Felicia Eggleston, 410-786-9287 or felicia.eggleston@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0