

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2525	Date: August 24, 2012
	Change Request 8032

SUBJECT: October 2012 Update of the Ambulatory Surgical Center Payment System (ASC)

I. SUMMARY OF CHANGES: This Recurring Update Notification describes changes to and billing instructions for various payment policies implemented in the October 2012 ASC update. This Recurring Update Notification applies to chapter 14, section 10.

EFFECTIVE DATE: October 1, 2012

IMPLEMENTATION DATE: October 1, 2012

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	

III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:

No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets

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 obliged 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

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

Attachment - Recurring Update Notification

Pub. 100-04	Transmittal: 2525	Date: August 24, 2012	Change Request: 8032
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SUBJECT: October 2012 Update of the Ambulatory Surgical Center Payment System (ASC)

EFFECTIVE DATE: October 1, 2012

IMPLEMENTATION DATE: October 1, 2012

I. GENERAL INFORMATION

A. Background: This Recurring Update Notification describes changes to and billing instructions for various payment policies implemented in the October 2012 ASC update. This Recurring Update Notification applies to chapter 14, section 10. CMS is not issuing an Ambulatory Surgical Center Fee Schedule (ASCFS) file nor an Ambulatory Surgical Center (ASC) Code Pair file this quarter.

B. Policy:

1. Drugs and Biologicals with Payments Based on Average Sales Price (ASP) Effective October 1, 2012

Payment for separately payable drugs and biologicals based on the average sales prices (ASPs) are updated on a quarterly basis as later quarter ASP submissions become available. In cases where adjustments to payment rates are necessary based on the most recent ASP submissions, we will incorporate changes to the payment rates in the October 2012 release of the ASC DRUG file. The updated payment rates, effective October 1, 2012, will be included in the October 2012 update of the ASC Payment system Addendum BB, which will be posted on the CMS Web site.

2. New HCPCS Codes for Drugs and Biologicals Separately Payable under the ASC Payment System Effective October 1, 2012

Two drugs and biologicals have been granted ASC payment status effective October 1, 2012. These items, along with their descriptors and payment indicators, are identified in Table 1.

Table 1 – New Separately Payable Drugs and Biologicals Effective October 1, 2012(see Attachment A: Policy Section Tables)

3. Updated Payment Rates for Certain Drugs and Biologicals HCPCS Codes Effective July 1, 2012 through September 30, 2012

The payment rates for three HCPCS codes were incorrect in the July 2012 ASC Drug File. The corrected payment rates are listed in Table 2 and have been included in the revised July 2012 ASC Drug File, effective for services furnished on July 1, 2012, through implementation of the October 2012 update. Suppliers who have received an incorrect payment for dates of service from July 1, 2012 through September 30, 2012, may request contractor adjustment of the previously processed claims.

Table 2 – Updated Payment Rates for Certain Drugs and Biologicals HCPCS Codes Effective July 1, 2012 through September 30, 2012 (see Attachment A: Policy Section Tables)

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement.

Number	Requirement	Responsibility										
		A/B MAC		D M E M A C	F I	C A R R I E R	R H I	Shared- System Maintainers				Other
		P a r t A	P a r t B					F I S S	M C S	V M S	C W F	
8032.1	<p>Medicare contractors shall download and install a revised July 2012 ASC DRUG file.</p> <p>FILENAME: MU00.@BF12390.ASC.CY12.DRUG.JULB.V0831</p> <p>NOTE: Date of retrieval will be provided in a separate email communication from CMS</p>		X			X						All EDC s
8032.1.1	<p>Medicare contractors shall adjust as appropriate claims brought to their attention that:</p> <p>1. Have dates of service that fall on or after July 1, 2012 through September 30, 2012 and;</p> <p>2. Were originally processed prior to the installation of the revised July 2012 ASC DRUG file.</p>		X			X						COB C
8032.2	<p>Medicare contractors shall download and install the October 2012 ASC DRUG file.</p> <p>FILENAME: MU00.@BF12390.ASC.CY12.DRUG.OCTA.V0831</p> <p>NOTE: Date of retrieval will be provided in a separate email communication from CMS</p>		X			X						All EDC s
8032.3	<p>Medicare contractors shall download and install the October 2012 ASC PI file.</p> <p>FILENAME: MU00.@BF12390.ASC.CY12.PI.OCTA.V0831</p> <p>NOTE: Date of retrieval will be provided in a separate email communication from CMS</p>		X			X						All EDC s

Number	Requirement	Responsibility											
		A/B MAC		D M E M A C	F I	C A R R I E R	R H I	Shared- System Maintainers				Other	
		P a r t A	P a r t B					F I S S	M C S	V M S	C W F		
8032.4	Contractors shall modify the procedure code file and TOS tables for HCPCS codes C9292-C9293, on/after October 1, 2012.		X			X							All EDC s and COB C
8032.5	CWF shall assign TOS F to HCPCS C9292-C9293, for claims with DOS on or after October 1, 2012.											X	
8032.6	Medicare contractors shall send notification of successful receipt via email to: price_file_receipt@cms.hhs.gov stating the name of the file received and the entity for which it was received (e.g., carrier/fiscal intermediary name and number).		X			X							

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility											
		A/B MAC		D M E M A C	F I	C A R R I E R	R H I	Other					
		P a r t A	P a r t B										
8032.7	MLN Article : A provider education article related to this instruction will be available at http://www.cms.hhs.gov/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 one week of the availability of the provider education article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to		X			X							

Number	Requirement	Responsibility						Other
		A/B MAC	D M E	F I	C A R R I E R	R H H I		
		P a r t A	P a r t B	M A C				
	supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.							

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A
 Use "Should" to denote 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): Chuck Braver, 410-786-6719 or chuck.braver@cms.hhs.gov (ASC Payment Policy) , Yvette Cousar, 410-786-2160 or yvette.cousar@cms.hhs.gov (Carrier/ AB MAC Claims Processing Issues) , Mark Baldwin, 410-786-8139 or mark.baldwin@cms.hhs.gov (Carrier/ AB MAC Claims Processing Issues)

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

VI. FUNDING

Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:

No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets

Section B: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS do 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.

ATTACHMENT(S): 1

Policy Section Tables**Table 1 – New Separately Payable Drugs and Biologicals Effective October 1, 2012**

HCPCS Code	Long Descriptor	Short Descriptor	ASC PI
C9292*	Injection, pertuzumab, 10 mg	Injection, pertuzumab	K2
C9293*	Injection, glucarpidase, 10 units	Injection, glucarpidase	K2

NOTE: The HCPCS codes identified with an "*" indicate that these are new codes effective October 1, 2012.

Table 2 – Updated Payment Rates for Certain Drugs and Biologicals HCPCS Codes Effective July 1, 2012 through September 30, 2012

HCPCS Code	Short Descriptor	ASC PI	Corrected Payment Rate
C9368	Grafix core	K2	\$160.66
C9369	Grafix prime	K2	\$51.84
Q2045	Human fibrinogen conc inj	K2	\$0.89