

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 381	Date: OCTOBER 3, 2008
	Change Request 6210

Subject: Competitive Acquisition Program (CAP) for Part B Drugs and Biologicals Vendor Identification Number, Iron Dextran Payment Update, and Physician Election

I. SUMMARY OF CHANGES: This CR updates the instructions regarding Vendor Identification Numbers in CAP claims processing and other related processes. This CR also updates the procedure for paying CAP claims for Iron dextran products. Finally, this CR also addresses processes related to CAP physician election.

New / Revised Material

Effective Date: January 1, 2009

Business Requirement 6210.3 – effective October 10, 2008

Business Requirement 6210.4 – effective October 10, 2008

Implementation Date: January 5, 2009

Business Requirement 6210.3 – implementation date no later than October 10, 2008

Business Requirement 6210.4 – implementation date no later than October 10, 2008

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:

SECTION A: For Fiscal Intermediaries and Carriers:

No additional funding will be provided by CMS; Contractor activities are to be carried out within 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 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:

One-Time Notification

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

Attachment – One-Time Notification

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SUBJECT: Competitive Acquisition Program (CAP) for Part B Drugs and Biologicals Vendor Identification Number, Iron Dextran Payment Update, and Physician Election

Effective Date: January 1, 2009
 Business Requirement 6210.3 – effective October 10, 2008
 Business Requirement 6210.4 – effective October 10, 2008

Implementation Date: January 5, 2009
 Business Requirement 6210.3 – implementation date no later than October 10, 2008
 Business Requirement 6210.4 – implementation date no later than October 10, 2008

I. GENERAL INFORMATION

A. Background: This CR updates instructions regarding Vendor Identification Numbers in CAP claims processing and other related processes. This CR also updates procedures pertaining to CAP physician election, which occurs on an annual basis from October 1 to November 15 as described in CR 4404.

This CR also updates the procedure for paying CAP claims for Iron dextran products. The HCPCS codes for two low volume products in the CAP (J1751 and J1752) were changed to Q4098 effective April 1, 2008. Payment amounts for these products when they are furnished under the CAP remain unchanged: iron dextran supplied under the CAP is paid at the contract’s existing payment amounts for J1751 and J1752. Claims for CAP drugs that would have been billed under J1751 and J1752 will continue to be billed and paid separately, but now under the existing CAP “NOC” code Q4082. HCPCS code Q4098 will not be added into the CAP.

B. Policy: This CR makes no changes to CAP policy.

II. BUSINESS REQUIREMENTS TABLE

Use “Shall” to denote a mandatory requirement

Number	Requirement	Responsibility (place an “X” in each applicable column)									
		A / B M A C	D M M A C	F I I E R	C A R I E R	R H I	Shared-System Maintainers				OTH ER
						F I S S	M C S	V M S	C W F		
6210.1	The contractor shall update the MCS provider file for the outgoing Vendor with an end date of 12/31/08.										CAP Designated Carrier
6210.2	Contractors shall verify that all physician election	X			X						

	entries in MCS for VIN Q103 indicate an election end date of December 31, 2008 for any active providers.												
6210.3	Contractors shall return all physician election forms that are received outside a regularly scheduled election period (which is described in CR4404) unless CR4404.7.1 applies.	X			X								
6210.4	Contractors shall respond to inquiries from physicians about returned election forms by indicating that forms were received outside a regularly scheduled election period.	X			X								
6210.5	When the Contractor receives CAP vendor drug claims with dates of service on or after April 1, 2008, iron dextran claims (pertaining to HCPCS J1751 and J1752) submitted under the CAP "NOC" Q4082 shall be paid at the appropriate CAP contract payment amounts for J1751 or J1752.												CAP designated carrier
6210.5.1	The contractor shall accept CAP vendor claims for iron dextran products identified under J1751 and J1752 in the approved CAP vendor's contract on the CAP drug list when iron dextran claims are submitted under the CAP "NOC" code Q4082.												CAP designated carrier
6210.5.1.1	The contractor shall pay the appropriate CAP contract payment amounts for J1751 or J1752 based on additional information received on the claim.												CAP designated carrier
6210.5.2	Contractors shall not search for and adjust claims processed prior to the implementation date. After the implementation date, contractors shall adjust claims when brought to their attention.	X			X								CAP designated carrier

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B M A C	D E M A C	F I M A C	C A R I E R	R H I I E R	Shared-System Maintainers				OTH ER
							F I S S	M C S	V M S	C W F	
6210.6	<p>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.</p> <p>Contractors shall post this article, or a direct link to this article, on their Web site 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 your 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.</p>	X			X						

IV. SUPPORTING INFORMATION

Section A: For any recommendations and supporting information associated with listed requirements, use the box below:

Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
4064	Competitive Acquisition Program (CAP) for Part B Drugs
4309	Additional Requirements for the Competitive Acquisition Program (CAP) for Part B Drugs
4404	Competitive Acquisition Program (CAP) for Part B Drugs Physician Election
5079	Competitive Acquisition Program (CAP) – Creation of Automated Tables for Provider Information, Expansion of CAP Fee Schedule File Layout, and Additional Instructions for Claims Received from Railroad Retirement Board (RRB) Beneficiaries
5259	Competitive Acquisition Program (CAP) – Claims Processing for Not Otherwise Classified Drugs
5579	Enhance to Claims Processing Requirements for the Competitive Acquisition Program (CAP) for Part B Drugs and Biologicals for the October 2007 Release

Section B: For all other recommendations and supporting information, use this space: N/A

V. CONTACTS

Pre-Implementation Contact(s): Edmund Kasaitis, Edmund.Kasaitis@cms.hhs.gov or at 410-786-0477 or Bonny Dahm, Bonny.Dahm@cms.hhs.gov or at 410-786-4006

Post-Implementation Contact(s): Edmund Kasaitis, Edmund.Kasaitis@cms.hhs.gov or at 410-786-0477 or Bonny Dahm, Bonny.Dahm@cms.hhs.gov or at 410-786-4006

VI. FUNDING

Section A: For *Fiscal Intermediaries (FIs)*, *Regional Home Health Intermediaries (RHHIs)*, and/or *Carriers*, use only one of the following statements:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

Section B: For *Medicare Administrative Contractors (MACs)*, include the following statement:

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.