

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 465	Date: March 27, 2009
	Change Request 6423

NOTE: Transmittal 438, Change Request 6294, dated February 6, 2009, is rescinded and replaced with Transmittal 465, dated March 27, 2009. The One Time Notification has been revised to add a New "WW" Code to Identify a New Source for Topotecan.

Subject: New "WW" Code to Identify a New Source for Topotecan

I. SUMMARY OF CHANGES: A new "WW" code has been established for the oral anti-cancer drug Topotecan. The addition of this code will allow the DME MACs to correctly adjudicate claims for Topotecan.

New / Revised Material

Effective Date: July 1, 2009

Implementation Date: July 6, 2009

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: New “WW” Code to Identify a New Source for Topotecan

Effective Date: July 1, 2009

Implementation Date: July 6, 2009

I. GENERAL INFORMATION

A. Background: Suppliers are currently instructed to bill oral anti-cancer drugs to the Durable Medical Equipment Medicare Administrative Contractors (DME MACs) using the appropriate National Drug Code (NDC). The addition of this “WW” code will allow the DME MACs to correctly adjudicate the oral anti-cancer drug Topotecan (i.e., NDC 00007-4205-11, NDC 00007-4207-11). The proposed addition will read:

WW140 – Topotecan, Oral, 0.25mg

B. Policy: The above “WW” code shall be used for internal systems processing only and providers shall continue to bill using the appropriate NDC codes for oral anti-cancer drugs.

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 E M A C	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTHER
						F I S S	M C S	V M S	C W F		
6423.1	The Common Working File (CWF) shall add HCPCS J8705 to their CWF HCPCS table. The CWF categories for J8705 are 17 and 60. The TOS for J8705 are 1, P, F and T.									X	
6423.2	The DME MACs and CWF shall make any changes necessary to accept and process WW140.		X							X	

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)								
		A / B M A C	D M E M A C	F I	C A R R I E R	R H I	Shared-System Maintainers			
						F I S S	M C S	V M S	C W F	
	None.									

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:

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

V. CONTACTS

Pre-Implementation Contact(s): Angela Costello at 410-786-1554 or angela.costello@cms.hhs.gov.

Post-Implementation Contact(s): Angela Costello at 410-786-1554 or angela.costello@cms.hhs.gov.

VI. FUNDING

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