CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12547	Date: March 14, 2024
	<b>Change Request 13560</b>

SUBJECT: July 2024 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to supply the contractors with the ASP and Not Otherwise Classified (NOC) drug pricing files for Medicare Part B drugs on a quarterly basis. The ASP payment limits are calculated quarterly based on quarterly data submitted to CMS by manufacturers.

### **EFFECTIVE DATE: July 1, 2024**

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

**IMPLEMENTATION DATE: July 1, 2024** 

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**

Pub. 100-04 | Transmittal: 12547 | Date: March 14, 2024 | Change Request: 13560

SUBJECT: July 2024 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files

**EFFECTIVE DATE: July 1, 2024** 

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

**IMPLEMENTATION DATE: July 1, 2024** 

#### I. GENERAL INFORMATION

**A. Background:** The ASP methodology is based on quarterly data submitted to the CMS by manufacturers. CMS will supply the contractors with the ASP and Not Otherwise Classified (NOC) drug pricing files for Medicare Part B drugs on a quarterly basis. Payment allowance limits under the Outpatient Prospective Payment System (OPPS) are incorporated into the Outpatient Code Editor (OCE) through separate instructions that can be located in chapter 4, section 50 of the Internet-only Manual.

**B.** Policy: This recurring update addresses the following pricing files:

File: July 2024 ASP and ASP NOC -- Effective Dates of Service: July 1, 2024, through September 30, 2024

File: April 2024 ASP and ASP NOC -- Effective Dates of Service: April 1, 2024, through June 30, 2024

File: January 2024 ASP and ASP NOC -- Effective Dates of Service: January 1, 2024, through March 31, 2024

File: October 2023 ASP and ASP NOC -- Effective Dates of Service: October 1, 2023, through December 31, 2023

File: July 2023 ASP and ASP NOC -- Effective Dates of Service: July 1, 2023, through September 30, 2023

### II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Re	spo	nsibili	ity					
		A/B MAC			DM	M Shared-Sys			n	Oth
					E Main			tainers	er	
		A	В	НН		FIS	MC	VM	CW	
				Н	MA	S	S	S	F	
					С					
13560.1	The Virtual Data Center (VDC) shall									VD
	have available via the CMS Virtual Data									C
	Center (CDC) the ASP drug pricing files									
	for Medicare Part B drugs for the July									
	2024 file and, if released, the revised									
	April 2024, January 2024, October 2023,									
	and July 2023 files.									
13560.1.	The contractors shall download the July	X	X	X	X					VD
1	2024 ASP drug pricing file through the									C

Number	Requirement	Responsibility								
				MAC	DM	5	Shared	-Syste	n	Oth
					Е		Maint	tainers		er
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F	
	CDC on or after June 20, 2024.									
13560.1. 1.1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.JUL.Q .V0620		X		X					
13560.1. 1.2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.JUL.Q .V0620.FISS	X		X						
13560.1. 1.3	The contractors shall retrieve the July 2024 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024.	X	X	X	X					
13560.1. 1.4	The contractors shall use the July 2024, ASP and NOC drug pricing files to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024 with dates of service July 1, 2024, through September 30, 2024.	X	X	X	X					
13560.1. 1.5	The contractors shall use the July 2024 ASP drug pricing file to update the drug payment limits for claims for infusion drugs furnished through a covered item of Durable Medical Equipment (DME) processed or reprocessed on or after July 1, 2024, with dates of service on or after July 1, 2024.		X		X					
13560.1.	The contractors shall download the revised April 2024 ASP drug pricing file through the CDC on or after June 20, 2024, if released by CMS.	X	X	X	X					VD C
13560.1. 2.1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.APR. Q.V0620.		X		X					
13560.1. 2.2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.APR. Q.V0620.FISS	X		X						
13560.1. 2.3	The contractors shall overlay or manually update the previous April 2024 file with the new April 2024 ASP drug pricing	X	X	X	X					

Number	Requirement	Re	espo	nsibil	oility							
				ИAC	DM	S	Shared	-Syster	n	Oth		
				1	Е		Maint	tainers		er		
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F			
	file, if released by CMS.											
13560.1. 2.4	The contractors shall use the revised April 2024 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service April 1, 2024, through June 30, 2024, if released by CMS.	X	X	X	X							
13560.1. 2.5	The contractors shall retrieve the revised April 2024 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024, if released by CMS.	X	X	X	X							
13560.1. 2.6	The contractors shall use the revised April 2024 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service April 1, 2024, through June 30, 2024, if released by CMS.	X	X	X	X							
13560.1.	The contractors shall download the revised January 2024 ASP drug pricing file through the CDC on or after June 20, 2024, if released by CMS.	X	X	X	X					VD C		
13560.1. 3.1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.JAN,Q .V0620.		X		X							
13560.1. 3.2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.JAN.Q .V0620.FISS	X		X								
13560.1. 3.3	The contractors shall overlay or manually update the previous January 2024 file with the new January 2024 ASP drug pricing file, if released by CMS.	X	X	X	X							
13560.1. 3.4	The contractors shall use the revised January 2024 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service	X	X	X	X							

Number	Requirement	Re	espo	nsibil	ility							
				MAC	DM	S	Shared-	-Syste	n	Oth		
					Е			tainers		er		
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F			
	January 1, 2024, through March 31, 2024, if released by CMS.											
13560.1. 3.5	The contractors shall retrieve the revised January 2024 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024, if released by CMS.	X	X	X	X							
13560.1. 3.6	The contractors shall use the revised January 2024 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service January 1, 2024, through March 31, 2024, if released by CMS.	X	X	X	X							
13560.1. 4	The contractors shall download the revised October 2023 ASP drug pricing file through the CDC on or after June 20, 2024, if released by CMS.	X	X	X	X					VD C		
13560.1. 4.1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY23.OCT. Q.V0620.		X		X							
13560.1. 4.2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY23.OCT. Q.V0620.FISS	X		X								
13560.1. 4.3	The contractors shall overlay or manually update the previous October 2023 file with the new October 2023 ASP drug pricing file, if released by CMS.	X	X	X	X							
13560.1. 4.4	The contractors shall use the revised October 2023 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service October 1, 2023, through December 31, 2023, if released by CMS.	X	X	X	X							
13560.1. 4.5	The contractors shall retrieve the revised October 2023 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024, if released by CMS.	X	X	X	X							

Number	Requirement	Re	espo	nsibil	ity					
		1		МАС	DM	5	Shared	-Syster	n	Oth
			L.		Е		Maint	tainers	L	er
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F	
13560.1. 4.6	The contractors shall use the revised October 2023 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service October 1, 2023, through December 31, 2023, if released by CMS.	X	X	X	X					
13560.1. 5	The contractors shall download the revised July 2023 ASP drug pricing file through the CDC on or after June 20, 2024, if released by CMS.	X	X	X	X					VD C
13560.1. 5.1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY23.JUL.Q .V0620		X		X					
13560.1. 5.2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY23.JUL.Q .V0620.FISS	X		X						
13560.1. 5.3	The contractors shall overlay or manually update the previous July 2023 file with the new July 2023 ASP drug pricing file, if released by CMS.	X	X	X	X					
13560.1. 5.4	The contractors shall use the revised July 2023 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service July 1, 2023, through September 30, 2023, if released by CMS.	X	X	X	X					
13560.1. 5.5	The contractors shall retrieve the revised July 2023 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024, if released by CMS.	X	X	X	X					
13560.1. 5.6	The contractors shall use the revised July 2023 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service July 1, 2023, through September 30, 2023, if	X	X	X	X					

Number	Requirement	Responsibility								
		A	/B N	MAC	DM	5		-Syste		Oth
				7777	E	FIG	1	tainers	1	er
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F	
	released by CMS.									
13560.2	The contractors shall not search and adjust claims that have already been processed unless brought to their attention.	X	X	X	X					
13560.3	The contractors shall notify CMS of successful receipt via email to price_file_receipt@cms.hhs.gov stating the name of the file received, (e.g., Clinical Laboratory Fee Schedule (CLAB), ASP, etc.) and the entity for which it was received (i.e., include states, carrier numbers, quarter, and if Part A, Part B, or both).	X	X	X	X					
13560.4	The ASP and NOC drug pricing files will contain the applicable payment allowance limits (i.e., 106% ASP, 106% Wholesale Acquisition Cost (WAC), or 95% Average Wholesale Price (AWP)); therefore, Medicare contractors shall not make any additional payment calculations.	X	X	X	X					
13560.5	For any drug or biological not listed in the ASP or NOC drug pricing files, the contractors shall determine the payment allowance limits in accordance with the policy described in the Medicare Claims Processing Manual, chapter 17, section 20.1.3.	X	X	X	X					
13560.5.	For any drug or biological not listed in the ASP or NOC drug pricing files that are billed with the KD modifier, the contractors shall determine the payment allowance limits in accordance with instructions for pricing and payment changes for infusion drugs furnished through an item of durable medical equipment on or after January 1, 2017, associated with the passage of the 21st Century Cures Act.	X	X	X	X					
13560.6	The contractors shall use the most current version available of the Medicare Contractor Reporting Template for Part B	X	X	X	X					

Number	Requirement	Re	espo	nsibil	oility						
				MAC	DM	S	Shared	-Syster	n	Oth	
					Е		1	tainers		er	
		A	В	HH H	MA	FIS S	MC S	VM S	CW F		
					С						
	drugs to report information on Medicare Part B drugs not paid on a cost or										
	prospective payment basis when payment										
	limits are not listed in the quarterly drug										
	pricing ASP and NOC files, or in the OPPS Pricer.										
13560.6. 1	The contractors shall use the template to report pricing information for:	X	X	X	X						
	NOC drugs not included on the Medicare Part B NOC pricing file										
	any Healthcare Common										
	Procedure Coding System										
	(HCPCS) drug codes not on the										
	ASP file, and										
	OPPS drugs not in the OPPS										
	Pricer.										
13560.6.	The contractors shall list all drugs that	X	X	X	X						
2	were priced since the last submitted										
	report.										
13560.6.	The contractors shall list each drug priced	X	X	X	X						
3	on the report only once.										
13560.6.	For compounded drugs, the contractors	X	X	X	X						
4	shall report the name of each drug in the										
	compounded product.										
13560.6.	The contractors shall prepare and submit	X	X		X						
5	the reports so that each report covers										
	approximately 30 days of pricing activity.										
13560.6.	The contractors shall report drugs	X	X	X	X						
6	omitted from previous reports in the next report.										
	10poit.										
13560.6.	The contractors shall complete the report	X	X	X	X						
7	in its entirety.										
13560.6.	The contractors shall not report		X								
8	radiopharmaceuticals.										
			l				<u> </u>				

Number	Requirement	Responsibility										
		A	/B N	MAC	DM E	S		-Syster tainers	n	Oth er		
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F			
13560.6. 9	The contractors shall report pricing information for drugs, biologicals, and radiopharmaceuticals that are billed using C9399.	X		X								
13560.6. 10	The contractors shall download the most current version available of the template from the CMS website at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice.	X	X	X	X							
13560.6. 11	The contractors shall complete the template on a monthly basis.	X	X	X	X							
13560.6. 12	The contractors shall ensure that the format of the template is Microsoft Excel.	X	X	X	X							
13560.6. 13	The contractors shall send the completed template to sec303aspdata@cms.hhs.gov on the first business day of the month.	X	X	X	X							
13560.6. 14	The contractor shall send an email to Sec303aspdata@cms.hhs.gov stating that the contractor has no drug pricing to report, if the contractor has not priced any drugs since the last submitted report, in lieu of using the template.	X	X	X	X							

# III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spor	ısibility	7	
			A/ M/		DME MAC	CEDI
		A	В	ННН		
13560.7	Medicare Learning Network® (MLN): CMS will develop and release national provider education content and market it through the MLN Connects® newsletter shortly after we issue the CR. MACs shall link to relevant information on your website and follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 for distributing the newsletter to providers. When you follow this manual section, you don't need to separately track	X	X	X	X	

Number	Requirement	Re	Responsibility				
			A	Β	DME	CEDI	
			MA	AC			
					MAC		
		Α	В	ННН			
	and report MLN content releases. You may supplement with						
	your local educational content after we release the newsletter.						

### IV. SUPPORTING INFORMATION

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

<sup>&</sup>quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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

### V. CONTACTS

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

#### VI. FUNDING

# **Section A: 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.

**ATTACHMENTS: 0**