

Outlier Services

Oral and Other Equivalent Forms of Injectable Drugs		
Outlier Services Imputed Payment Amounts Oral or Other Equivalent Forms of Part B Injectable Drugs Included in the ESRD PPS Bundle (notwithstanding the delayed implementation of ESRD-related oral-only drugs effective 1/1/2014)		
NDC	Drug Product	Mean Unit Cost
30698014301 30698014323 54868346100	Rocaltrol (calcitriol) 0.25 mcg capsules	\$1.45
30698014401	Rocaltrol (calcitriol) 0.5 mcg capsules	\$2.31
30698091115	Rocaltrol (calcitriol) 1 mcg/mL oral solution (15ml/bottle)	\$12.33
00054000725 00054000713 00093065701 43353063381 00440721599 54868458400 63304023901 63304023930 67544103581	Calcitriol 0.25 mcg capsules	\$0.98
00093065801 54868458200 63304024001	Calcitriol 0.5 mcg capsules	\$1.60
00054312041 63304024159	Calcitriol 1 mcg/mL oral solution (15ml/bottle)	\$9.57
00074431730	Zemplar (paricalcitol) 1 mcg capsule	\$8.89
00074431430	Zemplar (paricalcitol) 2 mcg capsule	\$17.76
00074431530	Zemplar (paricalcitol) 4 mcg capsule	\$35.31
58468012001	Hectorol (doxercalciferol) 0.5 mcg capsule	\$6.49
58468012401	Hectorol (doxercalciferol) 1 mcg capsule	\$12.96
58468012101	Hectorol (doxercalciferol) 2.5 mcg capsule	\$22.52
54482014407	Carnitor (levocarnitine) 330 mg tablet	\$0.82
54482014508	Carnitor (levocarnitine) 1GM/10ML oral solution (118mL/bottle)	\$0.25
54482014701	Carnitor (levocarnitine) 1 g/5 mL injection	\$6.48
64980050312 50383017104	Levocarnitine 1GM/10ML oral solution (118mL/bottle)	\$0.20
64980013009 50383017290	Levocarnitine 330 mg tablet	\$0.67
<p>The mean dispensing fee of the NDCs listed above is \$1.59. This amount will be applied to each NDC included on the monthly claim. We will limit 1 dispensing fee per NDC per month. Providers should report the quantity in the smallest available unit. This is necessary because Medicare is using the mean per unit cost in calculating the outlier. For example, if the provider reports NDC 00054312041 Calcitriol 1 mcg/ml oral solution (15/ml/bottle) and uses the full 15 ml bottle, the quantity is reported as 15, not 1. This allows for the most accurate calculation for the outlier.</p>		

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Laboratory Tests	
CPT/HCPCS	Short Description
82108	Assay of aluminum
82306	Vitamin d, 25 hydroxy
82379	Assay of carnitine
82570	Assay of urine creatinine
82575	Creatinine clearance test
82607	Vitamin B-12
82652	Vit d 1, 25-dihydroxy
82668	Assay of erythropoietin
82728	Assay of ferritin
82746	Blood folic acid serum
83540	Assay of iron
83550	Iron binding test
83735	Assay of magnesium
83970	Assay of parathormone
84134	Assay of prealbumin
84466	Assay of transferrin
84540	Assay of urine/urea-n
84545	Urea-N clearance test
85041	Automated rbc count
85044	Manual reticulocyte count
85045	Automated reticulocyte count
85046	Reticyte/hgb concentrate
85048	Automated leukocyte count

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86704	Hep b core antibody, total
86705	Hep b core antibody, igm
86706	Hep b surface antibody
87040	Blood culture for bacteria
87070	Culture, bacteria, other
87071	Culture bacteri aerobic othr
87073	Culture bacteria anaerobic
87075	Cultr bacteria, except blood
87076	Culture anaerobe ident, each
87077	Culture aerobic identify
87081	Culture screen only
87340	Hepatitis b surface ag, eia
Syringes	
HCPCS Code	Description
A4657	Syringes with or with needle, each
A4913	Miscellaneous dialysis supplies, not otherwise specified