



News Flash - The 2008 Physician Election Period for the Medicare Part B Drug Competitive Acquisition Program (CAP) will begin on October 1, 2007 and concludes on November 15, 2007. The CAP is a voluntary program that offers physicians the option to acquire many injectable and infused drugs they use in their practice from an approved CAP vendor, thus reducing the time they spend buying and billing for drugs. The 2008 CAP program will run from January 1 to December 31, 2008. Once a physician has elected to participate in CAP, they must obtain all drugs on the CAP drug list from the CAP drug vendor. Physicians can still continue to purchase and bill Medicare under the Average Sale Price (ASP) system for those drugs that are not provided by the physician's CAP vendor. Additional information about the CAP is available at <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/CompetitiveAcquisforBios/index.html> on the CMS website. Please note that completed and signed physician election forms should be returned by mail to your local carrier. Forms must be postmarked on or before November 15, 2007. DO NOT return forms to CMS offices.

MLN Matters Number: MM5741 **Revised**

Related Change Request (CR) #: 5741

Related CR Release Date: October 5, 2007

Effective Date: July 1, 2007

Related CR Transmittal #: R1350CP

Implementation Date: November 5, 2007

Correction to Revised HCPCS Codes Relating to Immune Globulin (CR 5635)

Note: This article was updated on September 20, 2012, to reflect current Web addresses. This article was also revised on February 19, 2008, to add a reference to related MLN Matters article MM5713 to the Additional Information Section at the end of this article. All other information remains unchanged.

Provider Types Affected

Suppliers who bill Medicare Durable Medical Equipment Medicare Administrative Contractors (DME MACs) for Immune Globulin

What You Need to Know

CR 5741, from which this article is taken, corrects CR5635 to show that it applies to suppliers billing DME MACs. CR5635 revised Healthcare Common Procedure Coding System (HCPCS) codes relating to immune globulin. **(Basically, the information in this article restates the requirements of CR5635 that apply to suppliers billing Medicare DME MACs.)** CR 5741 announces that on and after July 1, 2007:

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- Code J1567 (injection, immune globulin, intravenous, non-lyophilized (e.g. liquid), 500 mg) is **no longer payable by Medicare**.
- It is being replaced by the following codes, which are effective for payment on July 1, 2007: **Q4087** (Octagam Injection), **Q4088** (Gammagard Liquid Injection), **Q4091** (Flebogamma Injection), and **Q4092** (Gamunex Injection).
- In addition, two new codes are payable for services on or after July 1, 2007:
 - **Q4089** (Rhophylac injection). Note that Currently, Rhophylac® is the only product that should be billed using code Q4089. If other products under the FDA approval for Rhophylac® become available, code Q4089 would be used to bill for such products.
 - **Q4090** (HepaGam B injection). *Note that currently, HepaGam B™, when given intramuscularly, is the only product that should be billed using code Q4090. If other products under the FDA's approval for HepaGam B™ IM become available, code Q4090 would be used to bill for such products. HepaGam B™ when given intravenously should be billed using an appropriate Not Otherwise Classified code in the absence of a specific HCPCS code.*
- As described in CR 5428, Medicare contractors will pay for pre-administration-related services (G0332) associated with IVIG administration when Q4087, Q4088, Q4091, or Q4092 is billed in lieu of J1567.

Make sure that your billing staffs are aware of these Immune Globulin HCPCS code changes.

Background

CR 5741 announces that effective July 1, 2007, Medicare will no longer pay for HCPCS code J1567 (injection, immune globulin, intravenous, non-lyophilized (e.g. liquid), 500 mg). In its place, effective July 1, 2007, codes Q4087, Q4088, Q4091, Q4092, and two new codes (Q4089, Q4090) become effective for payment. Table 1, below, displays these codes and their descriptions.

Table 1
HCPCS Code Changes for Immune Globulin
Effective July 1, 2007

Code	Short Description	Long Description
Status: Not Payable by Medicare on or after July 1, 2007		
J1567	Immune globulin, liquid	Injection, immune globulin, intravenous, non-lyophilized (e.g. liquid), 500 mg
Status: Payable for services on or after July 1, 2007		
Q4087	Octagam Injection	Injection, immune globulin (Octagam), intravenous, non-lyophilized (e.g. liquid), 500 mg

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Code	Short Description	Long Description
Q4088	Gammagard Liquid Injection	Injection, immune globulin (Gammagard Liquid), intravenous, non-lyophilized (e.g. liquid), 500 mg
Q4091	Flebogamma Injection	Injection, immune globulin (Flebogamma), intravenous, non-lyophilized (e.g. liquid), 500 mg
Q4092	Gamunex Injection	Injection, immune globulin (Gamunex), intravenous, non-lyophilized (e.g.liquid), 500 mg
Status: New/Payable for services on or after July 1, 2007		
Q4089	Rhophylac injection	Injection, Rho(D) immune globulin (human), (Rhophylac), intramuscular or intravenous, 100 iu
Q4090	HepaGam B injection	Injection, hepatitis B immune globulin (HepaGam B), intramuscular, 0.5 ml

Additional Information

You can find the official instruction issued to your Medicare DME MAC about the revised HCPCS codes relating to Immune Globulin by going to CR5741, located at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1350CP.pdf> on the CMS website.

Providers may also wish to review the following related articles:

- **MM5428:** "Medicare Payment for Pre-administration-Related Services Associated with IVIG Administration—Payment Extended through CY 2007" at <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/MM5428.pdf>;
- **MM5713:** "Medicare Payment for Pre-administration-Related Services Associated with Intravenous Immune Globulin (IVIG) Administration—Payment Extended through CY 2008" at <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/mm5713.pdf>; and
- **MM5635:** "Revised HCPCS Codes Relating to Immune Globulin" at <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/mm5635.pdf> on the CMS website. MM5635 implemented HCPCS coding changes for Immune Globulin. On and after July 1, 2007, HCPCS code **J1567** (injection, immune globulin, intravenous, non-lyophilized (e.g. liquid), 500 mg)) will no longer be payable by Medicare.

If you have any questions, please contact your DME MAC at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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