

Related Change Request (CR) #: 3078 Related CR Release Date: February 27, 2004 Effective Date: January 1, 2004 Implementation Date: March 29, 2004 Medlearn Matters Number: MM3078

MMA-New Requirements for End Stage Renal Disease (ESRD) Drug Payments

Provider Types Affected

Providers caring for ESRD patients and billing Medicare for drugs in independent dialysis facilities.

Provider Action Needed

Providers should note that drugs not included in the composite rate that are furnished in independent dialysis facilities will be paid at the lower of billed charges or 95% Average Wholesale Price (AWP). This went into effect with services provided on or after January 1, 2004.

Billing offices for such facilities should be aware of this and take appropriate steps to incorporate this change. Please note that hospital based facilities are paid at cost.

Background

New requirements have been established with the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA), PL 108-173, signed into law on December 8, 2003, for the payment of drugs furnished in independent dialysis facilities and paid outside of the composite rate.

See the Medicare Benefit Policy Manual, Chapter 11, for a description of drugs that are part of the composite rate and when other drugs may be covered. Section 30 of that chapter provides details on drugs included in the composite rate. To view this information, visit:

http://www.cms.hhs.gov/manuals/102_policy/bp102c11.pdf.

Effective January 1, 2004, drugs furnished to ESRD patients in independent dialysis facilities and paid outside of the composite rate will be paid at the lower of billed charges or 95% AWP for the calendar year 2004.

Implementation

March 29, 2004.

Disclaimer

Medlearn Matters articles are prepared as a service to the public and are not intended to grant rights or impose obligations. Medlearn Matters articles may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

Related Instructions

The *Medicare Claims Processing Manual, Chapter 8, Section 60, Subsections 60.2/Drugs Furnished in Dialysis Facilities*, has been revised to include this new requirement. You may view this chapter by going to:

http://www.cms.hhs.gov/manuals/104_claims/clm104c08.pdf

The actual CR released to the Medicare fiscal intermediaries may be found at:

http://www.cms.hhs.gov/manuals/pm_trans/R110CP.pdf

Disclaimer Medlearn Matters articles are prepared as a service to the public and are not intended to grant rights or impose obligations. Medlearn Matters articles may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.