# Program Memorandum Intermediaries

Department of Health & Human Services (DHHS)
Centers for Medicare & Medicaid Services (CMS)

Transmittal A-01-107 Date: SEPTEMBER 6, 2001

**CHANGE REQUEST 1822** 

# SUBJECT: October 2001 Update to the Hospital Outpatient Prospective Payment System (OPPS)

This Program Memorandum (PM) provides certain changes to the hospital OPPS for the October 2001 update. These changes include the following: one "new technology procedure/service," revised APCs for certain "new technology procedures/services," two new drugs eligible for pass-through payments, one new blood product reportable under OPPS, and revised payment rates for two drugs eligible for pass-through payments. Unless otherwise indicated, the effective date for items listed in this PM is October 1, 2001.

The OCE and PRICER currently contain the codes included in this document. However, fiscal intermediaries must add the following C-codes to the Healthcare Common Procedure Coding System (HCPCS) file in their internal claims processing systems: C9110, C9506, and C9711.

The listing of HCPCS codes contained in this instruction does not assure coverage of the specific item or service in a given case. To receive transitional pass-through payments or new technology payments, qualified items and services must be considered reasonable and necessary in a given case.

#### I. New Technology Procedure/Service Ambulatory Payment Classification (APC)

HCPCS Code	<u>SI</u>	<u>APC</u>	<u>Descriptors</u>
C9711	T	978	Short Descriptor: H.E.L.P. Apheresis System Long Descriptor: H.E.L.P. Apheresis System

#### II. Revised New Technology Procedure/Service APCs

HCPCS Code	Old <u>SI</u>	Old APC	New <u>SI</u>	New APC	<b>Descriptors</b>	
C1050	S	976	T	978	Short Descriptor: Long Descriptor:	Prosorba Column Prosorba Column
C9701	S	976	T	980	Short Descriptor: Long Descriptor:	Stretta procedure Stretta procedure

#### III. New Drugs Eligible for Pass-Through Payments

HCPCS Code	<u>SI</u>	<u>Descriptors</u>	<u>APC</u>	Payment <u>Rate</u>	Min Unadj. <u>Co-Insurance</u>
C9110	J	Short Desc: Alemtuzumab, per 10 mg/ml Long Desc: Alemtuzumab, per 10 mg/ml	9110	\$ 486.88	\$ 69.70
J9219	J	Short Desc: Leuprolide acetate implant Long Desc: Leuprolide acetate implant, 65 mg	7051	\$ 5,399.80	\$ 773.02

## IV. New Blood Product Reportable Under OPPS

HCPCS Code	<u>SI</u>	<u>Descriptors</u>	<u>APC</u>	Payment <u>Rate</u>	Min Unadj. <u>Co-Insurance</u>
C9506	K	Short Desc: Granulocytes, pheresis Long Desc: Granulocytes, pheresis, each unit	9506	\$ 1,475.00	\$ 295.00

### V. Revised Payment Rates for Two Drugs Eligible for Pass-Through Payments

HCPCS	CT.	Descriptors	ADC	Old Payment	New Payment	New Min Unadj.
<u>Code</u>	<u>SI</u>	<u>Descriptors</u>	<u>APC</u>	<u>Rate</u>	<u>Rate</u>	<b>Co-Insurance</b>
A9504	G	Short Desc: Technetium TC 99M apcitide [per vial]	1602	\$ 45.13	\$ 475.00	\$ 68.00
		Long Desc: Supply of radiopharmaceutical diagnostic imaging agent, technetium TC 99M apcitide				
A9700	G	Short Desc: Echocardiography contrast [per 3 ml, single-dose vial]	9016	\$ 39.58	\$ 118.75	\$ 17.00
		Long Desc: Supply of injectable contrast material for use in echocardiography, per study				

The effective date for this PM is October 1, 2001.

The implementation date for this PM is October 1, 2001.

This PM may be discarded after October 1, 2002.

These instructions should be implemented within your current operating budget.

For questions, contact your regional office.