

Related Change Request (CR) #: 3184
Related CR Release Date: June 4, 2004
Related CR Transmittal #: 197
Effective Date: January 1, 2004
Implementation Date: October 4, 2004

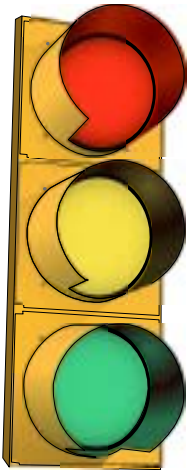
Medlearn Matters Number: MM3184

Emergency Hospital Outpatient Billing of Eproetin Alfa (EPO) and Darbepoetin Alfa (Aranesp)

Provider Types Affected

Hospitals

Provider Action Needed



STOP – Impact to You

Hospitals are now able to bill End Stage Renal Disease (ESRD)-related anemia on an outpatient visit to the emergency room as described in this article.

CAUTION – What You Need to Know

HCPCS codes Q4054 and Q4055 can be billed on a 13X type of bill (TOB) for ESRD patients requiring EPO or Aranesp administration for ESRD-related anemia in association with a hospital outpatient visit related to a medical emergency.

GO – What You Need to Do

Keep in mind that the administration for EPO/Aranesp may be required in an outpatient emergency setting and Medicare now pays for that administration. Payment will be limited to unscheduled EPO/Aranesp administrations for ESRD patients with medical emergencies.

Background

When ESRD patients come to the hospital for a medical emergency, their dialysis-related anemia may also require treatment. For patients with ESRD who are on a regular schedule of dialysis, EPO, or Aranesp may be administered in a hospital outpatient department with EPO being paid by Medicare using the statutory rate for EPO and with Aranesp being paid based on the MMA (Medicare Modernization Act) Drug Pricing File rate.

Reporting EPO Charges

Report EPO charges under the revenue code 0634 if less than 10,000 units of EPO are used and use revenue code 0635 if more than 10,000 units are administered. Use HCPCS code Q4055 for EPO,

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reporting the total number of units as a *multiple* of 1000 units in the unit field and place the hematocrit value for the hospital outpatient visit in the value code 49. *Example: 40,000 units of EPO administered; Revenue code 635 and 40 placed in units field.*

Reporting Aranesp Charges

For Aranesp, report charges under revenue code 0636 with HCPCS code Q4054. Report the total number of units as a multiple of 1mcg in the unit field and the value code 49 will contain the hematocrit value for hospital outpatient visit.

Note also that Medicare will calculate a coinsurance based on the payment amount for EPO/Aranesp furnished in a hospital outpatient emergency setting and will apply the Medicare deductible as applicable.

Implementation Dates

While this policy is effective as of January 1, 2004, it will be implemented in Medicare claims processing systems on October 4, 2004.

Additional Information

To view the actual instruction issued by Medicare on this change, please see:

http://www.cms.hhs.gov/manuals/pm_trans/R197CP.pdf

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