



American Red Cross

REIMBURSEMENT UPDATE

November 2009



CMS Finalizes CY 2010 Medicare Hospital Outpatient Payment Changes for Blood Products and Clinical Services

On October 30, 2009, the Centers for Medicare and Medicaid Services (CMS) **released the calendar year (CY) 2010 Medicare hospital outpatient prospective payment system (OPPS) final rule.** This rule includes final ambulatory payment classification (APC) payment changes for blood products and blood-related services, as well as clinical services like therapeutic apheresis and cellular therapy, furnished in the hospital outpatient setting¹.



Download the OPPS final rule: <http://www.cms.hhs.gov/HospitalOutpatientPPS/HORD/list.asp#TopOfPage>

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All CPT codes and payment rates are provided for informational purposes only. Providers must determine the appropriate setting in which to furnish a service, as well as the appropriate and proper way in which to code and bill for all products and services that they provide to patients.

All payment amounts for procedures are Medicare unadjusted OPPS rates. Actual payment amounts for procedures (but not for blood products) are subject to geographic adjustments.

More information at
www.redcross.org/hospitals/reimbursement
Send reimbursement inquiries to
reimburse@usa.redcross.org

¹ OPPS, APCs, and MS-DRGs do not apply to CAHs, which are reimbursed based on reasonable costs.

The changes in the final rule will take effect on January 1, 2010. We summarize the changes below.

FINAL OPPTS PAYMENT CHANGES FOR BLOOD PRODUCTS AND RELATED SERVICES

- The CY 2010 OPPTS final rule will increase APC payment amounts for many blood products. OPPTS payments will increase by an unweighted average of 6% across products.
- One of the largest payment increases (181%) is for split units (HCPCS code P9011), which will be paid at \$87.39 in CY 2010.
- CMS will continue to base APC payment rates for blood products on the charges that hospitals have reported on past Medicare claims. This ratesetting methodology will cause payment rates for certain key blood products to decrease in CY 2010.
- The APC payment rate for leukocyte-reduced red blood cells (HCPCS code P9016), the highest-volume blood product, will decrease by approximately 1% to \$186.73.
- The Red Cross is concerned about this decrease in payment and—along with other key stakeholders in the blood banking industry—urged CMS to adjust its ratesetting methodology to account for the rising costs of blood products. However, in the final rule, CMS decided to apply its standard methodology without any adjustment.
- CMS's commitment to its charge-based ratesetting methodology makes it crucial for hospitals to ensure that their processing charges for blood products are set at appropriate levels. Hospital processing charges for blood products always should reflect acquisition cost (that is, the blood supplier's processing fees for the units) plus an appropriate mark-up.
- **Reporting appropriate charges now will help to ensure that future Medicare payment rates reflect more accurately the true costs of blood and blood products.**
- Final CY 2010 unadjusted APC payment rates for blood-related services include \$227.89 for transfusion CPT code 36430, \$49.77 for autologous collection/processing CPT code 86890, and \$14.80 for antigen screening CPT code 86903 and perioperative autologous cell salvage (PACS) code 86891.
- A list of the final CY 2010 APC payment rates for all blood products is available in the table at the end of this Update.

FINAL APC PAYMENT RATES FOR THERAPEUTIC APHERESIS

When coverage requirements are met, Medicare pays separately for therapeutic apheresis services in the hospital outpatient setting under OPPTS.

- In the inpatient setting, reimbursement for therapeutic apheresis is bundled into the all-inclusive Medicare severity diagnosis-related group (MS-DRG) payment.
- Below, we compare the CY 2010 and CY 2009 Medicare payment amounts for therapeutic apheresis services in the hospital outpatient setting.

| CPT | Description | 2010 APC Payment | 2009 APC Payment | % Change 2010 vs. 2009 |
|-------|---|------------------|------------------|------------------------|
| 36511 | Therapeutic apheresis, for white blood cells | \$804.99 | \$759.70 | 6% |
| 36512 | Therapeutic apheresis, for red blood cells | \$804.99 | \$759.70 | 6% |
| 36513 | Therapeutic apheresis, for platelets | \$804.99 | \$759.70 | 6% |
| 36514 | Therapeutic apheresis, for plasma pheresis | \$804.99 | \$759.70 | 6% |
| 36515 | Therapeutic apheresis, with extracorporeal immunoadsorption and plasma reinfusion | \$2,246.01 | \$2,033.73 | 10% |
| 36516 | Therapeutic apheresis, with extracorporeal selective adsorption or selective filtration and plasma reinfusion | \$2,246.01 | \$2,033.73 | 10% |
| 36522 | Photopheresis, extracorporeal | \$2,246.01 | \$2,033.73 | 10% |

Due to current National Correct Coding Initiative (CCI) edits, Medicare generally will not pay separately for a blood transfusion billed with a therapeutic apheresis CPT code unless the transfusion is distinct and separate from the therapeutic apheresis procedure (in which case, the transfusion should be billed with modifier -59).

FINAL APC PAYMENT RATES FOR CELLULAR THERAPY

When coverage requirements are met, Medicare pays separately for most stem cell collection and processing services in the hospital outpatient setting under OPSS.

- However, CMS will discontinue separate payment for CPT code 38205 (Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; allogeneic) under OPSS in CY 2010, since all services related to acquiring the stem cells from a donor are included in the Medicare payment for the stem cell transplant.
- Other stem cell collection and processing services will remain separately payable in the hospital outpatient setting in CY 2010.
- In the inpatient setting, reimbursement for stem cell collection and processing is bundled into the all-inclusive MS-DRG payment.
- Below, we compare the CY 2010 and CY 2009 Medicare payment amounts for stem cell collection and processing services in the hospital outpatient setting.

| CPT | Description | 2010 APC Payment | 2009 APC Payment | % Change 2010 vs. 2009 |
|-------|--|-------------------|------------------|------------------------|
| 38205 | Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; allogeneic | No longer payable | \$759.70 | N/A |
| 38206 | Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; autologous | \$804.99 | \$759.70 | 6% |
| 38207 | Transplant preparation of hematopoietic progenitor cells; cryopreservation and storage | \$227.89 | \$221.59 | 3% |
| 38208 | Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, without washing | \$227.89 | \$221.59 | 3% |
| 38209 | Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, with washing | \$227.89 | \$221.59 | 3% |
| 38210 | Transplant preparation of hematopoietic progenitor cells; specific cell depletion within harvest, T-cell depletion | \$390.10 | \$400.19 | -3% |
| 38211 | Transplant preparation of hematopoietic progenitor cells; tumor cell depletion | \$390.10 | \$400.19 | -3% |
| 38212 | Transplant preparation of hematopoietic progenitor cells; red blood cell removal | \$390.10 | \$400.19 | -3% |
| 38213 | Transplant preparation of hematopoietic progenitor cells; platelet depletion | \$390.10 | \$400.19 | -3% |
| 38214 | Transplant preparation of hematopoietic progenitor cells; plasma (volume) depletion | \$390.10 | \$400.19 | -3% |
| 38215 | Transplant preparation of hematopoietic progenitor cells; cell concentration in plasma, mononuclear, or buffy coat layer | \$390.10 | \$400.19 | -3% |

More information on billing for blood products and related services can be found on our Web site at www.redcross.org/hospitals/reimbursement.

Comparison of Final CY 2009 and Final CY 2010 Medicare APC Payment Rates for Blood and Blood Products

| HCPCS | Description | 2010 Final Payment | 2009 Final Payment | % Change 2010 vs. 2009 |
|--------------|--|--------------------|--------------------|------------------------|
| P9010 | Whole blood for transfusion | \$206.25 | \$230.40 | -10% |
| P9011 | Blood split unit | \$87.39 | \$31.12 | 181% |
| P9012 | Cryoprecipitate each unit | \$46.58 | \$42.46 | 10% |
| P9016 | RBC leukocytes reduced | \$186.73 | \$188.92 | -1% |
| P9017 | Plasma 1 donor frz w/in 8 hr | \$76.02 | \$76.73 | -1% |
| P9019 | Platelets, each unit | \$66.61 | \$73.25 | -9% |
| P9020 | Platelet rich plasma unit | \$136.79 | \$394.95 | -65% |
| P9021 | Red blood cells unit | \$141.73 | \$136.82 | 4% |
| P9022 | Washed red blood cells unit | \$246.00 | \$261.64 | -6% |
| P9023 | Frozen plasma, pooled, sd | \$51.15 | \$58.83 | -13% |
| P9031 | Platelets leukocytes reduced | \$104.76 | \$111.67 | -6% |
| P9032 | Platelets, irradiated | \$150.45 | \$164.42 | -8% |
| P9033 | Platelets leukoreduced irradiated | \$131.95 | \$128.19 | 3% |
| P9034 | Platelets, pheresis | \$469.11 | \$468.66 | 0% |
| P9035 | Platelet pheresis leukoreduced | \$512.11 | \$514.82 | -1% |
| P9036 | Platelet pheresis irradiated | \$357.96 | \$469.53 | -24% |
| P9037 | Platelet pheresis leukoreduced irradiated | \$676.57 | \$653.50 | 4% |
| P9038 | RBC irradiated | \$225.80 | \$250.69 | -10% |
| P9039 | RBC deglycerolized | \$363.91 | \$341.43 | 7% |
| P9040 | RBC leukoreduced irradiated | \$245.02 | \$251.33 | -3% |
| P9043 | Plasma protein fraction, 5%, 50ml | \$65.75 | \$15.62 | 321% |
| P9044 | Cryoprecipitate reduced plasma | \$94.60 | \$85.16 | 11% |
| P9048 | Plasma protein fraction, 5%, 250ml | \$107.96 | \$196.27 | -45% |
| P9050 | Granulocytes, pheresis unit | \$44.92 | \$1,669.99 | -97% |
| P9051 | Blood, l/r, cmv-neg | \$135.32 | \$144.13 | -6% |
| P9052 | Platelets, hla-m, l/r, unit | \$736.68 | \$711.89 | 3% |
| P9053 | Platelet pheresis, l/r cmv-neg, irradiated | \$656.72 | \$649.24 | 1% |
| P9054 | Blood, l/r, frozen/deglycerolized/washed | \$103.62 | \$101.68 | 2% |
| P9055 | Platelet pheresis, aph/pheresis, l/r, cmv-neg | \$419.23 | \$480.41 | -13% |
| P9056 | Blood, l/r, irradiated | \$165.16 | \$226.31 | -27% |
| P9057 | RBC, frozen/deglycerolized/washed, l/r, irradiated | \$363.04 | \$424.67 | -15% |
| P9058 | RBC, l/r, cmv-neg, irradiated | \$293.92 | \$301.43 | -2% |
| P9059 | Plasma, frozen between 8-24 hours | \$77.46 | \$75.62 | 2% |
| P9060 | Frozen plasma donor retested | \$71.88 | \$64.25 | 12% |