Delegated Provider Portal Postings

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CMS Updates

CMS Transmittals

LRR-2022-GOV-6225450 - The Centers for Medicare & Medicaid Services (CMS) released Transmittal 11502 on November 2, 2022 with information regarding telehealth services for Home Health. Beginning on or after January 1, 2023, Home Health Agencies (HHAs) may begin to voluntarily report the use of telecommunications technology in the provision of home health services on the home health payment claims.

CMS Transmittals are located at: Transmittals | CMS

➤ LRR-2022-GOV-6230847 - The Centers for Medicare & Medicaid Services (CMS) issued the Transmittal to update the annual per-beneficiary therapy caps now called the KX modifier thresholds and related policy for calendar year 2023. The CY 2023 KX modifier threshold amounts are: \$2,230 for Physical Therapy and Speech-Language Pathology services combined and \$2,230 for Occupational Therapy services.

CMS Transmittals are located at: Transmittals | CMS

➤ LRR-2022-GOV-6225213 – The Centers for Medicare & Medicaid Services (CMS) issued updates to policy information regarding Part B Immunosuppressant Drug (PBID) benefits, effective January 1, 2023.

CMS Transmittals are located at: Transmittals | CMS

➤ LRR-2022-GOV-6227298 – The Centers for Medicare & Medicaid Services (CMS) issued Original Medicare instruction updating the Prospective Payment System (PPS) base payment rate and the Geographic Adjustment Factors (GAFs) for the Federally Qualified Health Center (FQHC) Pricer that will be effective January 1, 2023.

The CMS Transmittal is located at: R11677CP | CMS

➤ LRR-2022-GOV-6227314 – The Centers for Medicare & Medicaid Services (CMS) has provided a maintenance update to the International Code of Diseases, Tenth Revision (ICD-10) conversions and other coding updates specific to National Coverage Determinations (NCDs).

The CMS Transmittal is located at: R11676OTN | CMS

LRR-2022-GOV-6240898 – The Centers for Medicare & Medicaid Services (CMS) has issued original Medicare instruction regarding the quarterly update to the National Correct Coding Initiative (NCCI) edits, Version 29.1, Effective April 1, 2023.

The CMS Transmittal is located at: R11706CP | CMS

➤ LRR-2022-GOV-6251497 - The Centers for Medicare & Medicaid Services (CMS) provided, to Original Medicare, updated instructions on how to process claims in the Part B physician office and independent clinics for Chimeric Antigen Receptor (CAR) T-Cell Therapy, effective for claims with dates of service on or after August 7, 2019.

The CMS Transmittal is located at: R11721CP | CMS

LRR-2022-GOV-6254712 - The Centers for Medicare & Medicaid Services (CMS) has issued an update to the DMEPOS fee schedules. The DMEPOS fee schedule file contains fee schedule amounts for non-rural and rural areas. Additionally, the Parenteral and Enteral Nutrition (PEN) fee schedule file includes state fee schedule amounts for enteral nutrition items and national fee schedule amounts for parenteral nutrition items. New codes added are effective January 1, 2023.

The CMS Transmittal is located at: R11722CP | CMS

➤ LRR-2022-GOV-6264303 - The Centers for Medicare & Medicaid Services (CMS) have issued Original Medicare instruction regarding the new Healthcare Common Procedure Coding System (HCPCS) codes for 2023 and how they will be handled by Clinical Laboratory Improvement Amendments (CLIA) edits.

The CMS Transmittal is located at: R11735CP | CMS

➤ LRR-2022-GOV-6264288 – The Centers for Medicare & Medicaid Services (CMS) is providing instructions to their Medicare Administrator contractors regarding the CY 2023 clinical laboratory fee schedule, mapping of new codes for clinical laboratory tests, and updates for laboratory costs subject to the reasonable charge payment.

The CMS Transmittal is located at: R11733CP | CMS

LRR-2022-GOV-6265629 – The Centers for Medicare & Medicaid Services (CMS) issued Original Medicare instruction regarding the January 2023 update of the Hospital Outpatient Prospective Payment System (OPPS). This instruction reflects updates to the Healthcare Common Procedure Coding System (HCPCS), Ambulatory Payment Classification (APC), HCPCS Modifier, and Revenue Code additions, changes, and deletions identified in this Change Request.

The CMS Transmittal is located at: R11737CP | CMS

➤ LRR-2022-GOV-6265628 - The Centers for Medicare & Medicaid Services (CMS) issued Original Medicare instruction regarding the January 2023 Integrated Outpatient Code Editor (I/OCE) Specifications. The Summary of Data Changes is effective January 1, 2023.

The I/OCE Specifications are posted at: I/OCE Quarterly Release Files | CMS

➤ LRR-2022-GOV-6270355 - The Centers for Medicare & Medicaid Services (CMS) has issued Original Medicare instruction related to the implementation of new ICD-10- Clinical Modification (CM) codes for collection of health-related social needs (HRSNs) and also introduces new ICD-10-PCS codes to the Medicare Severity – Diagnosis Related Groups (MS-DRG) Grouper and Medicare Code Editor (MCE) version 40.1, effective for discharges on and after April 1, 2023.

The CMS Transmittal is located at: R11746CP | CMS

LRR-2022-GOV-6287478 – The Centers for Medicare & Medicaid Services (CMS) issued Original Medicare instruction regarding the January 2023 update of the Ambulatory Surgical Center (ASC) Payment System.

The CMS Transmittal is located at: R11762CP | CMS

CMS Website

➤ LRR-2022-GOV-6219848- The Centers for Medicare & Medicaid Services (CMS) updated their webpage, Medicare COVID-19 Vaccine Shot Payment on October 30, 2022.

The COVID-19 Vaccine website:

Medicare COVID-19 Vaccine Shot Payment | CMS

LRR-2022-GOV-6225138- The Centers for Medicare & Medicaid Services (CMS) posted an updated zip file to their webpage, List of Telehealth Services, on November 2, 2022. The file contains a list of services payable under the Medicare Physician Fee Schedule when furnished via telehealth, effective January 1, 2023.

The List of Telehealth Services website is located at: <u>List of Telehealth Services | CMS</u>

LRR-2022-GOV-6251574 & LRR-2022-GOV-6268604 - The Centers for Medicare & Medicaid Services (CMS) updated their webpage on November 22, 2022 and December 9, 2022, COVID-19 Monoclonal Antibodies. Additional information was provided in several sections regarding specific Covid-19 Monoclonal Antibodies products and for updates to CPT and HCPCS codes.

The COVID-19 Website:

COVID-19 Monoclonal Antibodies | CMS

LRR-2022-GOV-6268541 - The Centers for Medicare & Medicaid Services (CMS) updated their website, New COVID-19 Treatments Add-On Payment (NCTAP), on December 13, 2022. On November 8, 2022, the FDA issued an EUA for Kineret (anakinra) injection for the treatment of COVID-19 in hospitalized adults with positive results of direct SARS-CoV-2 viral testing with pneumonia requiring supplemental oxygen (low- or high-flow oxygen) who are at risk of progressing to severe respiratory failure and likely to have an elevated plasma soluble urokinase plasminogen activator receptor (suPAR).

The New COVID-19 Treatments Add-On Payment (NCTAP) Website: New COVID-19 Treatments Add-On Payment (NCTAP) | CMS

▶ LRR-2022-GOV-6270332 & LRR-2022-GOV-6271531- The Centers for Medicare & Medicaid Services (CMS) posted the January 2023 ASP files on their webpage, 2023 ASP Drug Pricing Files on December 14, 2022.

The 2023 ASP Drug Pricing Files webpage is located at: 2023 ASP Drug Pricing Files | CMS

LRR-2022-GOV-6270333 & LRR-2022-GOV-6271531- The Centers for Medicare & Medicaid Services (CMS) posted updates to the April, July, and October 2022 ASP files on their webpage, 2022 ASP Drug Pricing Files on December 14, 2022.

The 2023 ASP Drug Pricing Files webpage is located at: 2022 ASP Drug Pricing Files | CMS

• Federal Register

➤ LRR-2022-GOV-6227119- The Centers for Medicare & Medicaid Services (CMS) issued Final Rule CMS-1766-F, that sets forth routine updates to the Medicare home health and home infusion therapy services payment rates for calendar year (CY) 2023 in accordance with existing statutory and regulatory requirements, effective January 1, 2023.

The Federal Register is located at:

Federal Register :: Medicare Program; Calendar Year (CY) 2023 Home Health Prospective Payment
System Rate Update; Home Health Quality Reporting Program Requirements; Home Health Value-Based
Purchasing Expanded Model Requirements; and Home Infusion Therapy Services Requirements

➤ LRR-2022-GOV-6229138- The Centers for Medicare & Medicaid Services (CMS) issued a final rule that includes changes or updates to CY 2023 Payment Policies under the Physician Fee Schedule and Other Changes to Part B Payment and Coverage Policies; Medicare Shared Savings Program Requirements; Implementing Requirements for Manufacturers of Certain Single-dose Container or Single-use Package Drugs to Provide Refunds with Respect to Discarded Amounts; and COVID-19 Interim Final Rules. Effective January 1, 2023.

The Federal Register is located at:

Federal Register :: Medicare and Medicaid Programs; CY 2023 Payment Policies Under the Physician Fee
Schedule and Other Changes to Part B Payment and Coverage Policies; Medicare Shared Savings Program
Requirements; Implementing Requirements for Manufacturers of Certain Single-dose Container or Single-use
Package Drugs To Provide Refunds With Respect to Discarded Amounts; and COVID-19 Interim Final Rules

LRR-2022-MCD-6245637- The Centers for Medicare & Medicaid Services (CMS) issued final rule, CMS-1772-FC, with comments, that revises the Medicare hospital outpatient prospective payment system (OPPS) and the Medicare ambulatory surgical center (ASC) payment system for Calendar Year (CY) 2023.

The Federal Register is located at:

Federal Register :: Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs; Organ Acquisition; Rural Emergency Hospitals: Payment Policies, Conditions of Participation, Provider Enrollment, Physician Self-Referral; New Service Category for Hospital Outpatient Department Prior Authorization Process; Overall Hospital Quality Star Rating; COVID-19

State Medicaid Updates

Illinois Medicaid

➤ LRR-2022-MCD-6253565- The Illinois Department of Healthcare and Family Services (HFS) has shared the Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) rates for Contract Year (CY) 2023.

The Rates are located at:
Medicaid Reimbursement | HFS (illinois.gov)

LRR-2022-MCD-6269440 - The Illinois Department of Healthcare and Family Services (HFS) advised that they have end-dated Bebtelovimab as a treatment for COVID-19, effective November 30, 2022. Plans are to ensure their systems are updated and refer any hospitals with questions to the appropriate information.

The Illinois Medicaid COVID-19 Fee Schedule: COVID19FeeScheduleEffective12282022Final.pdf (illinois.gov)

➤ LRR-2022-MCD-6283171 - The Illinois Department of Healthcare and Family Services (HFS) is announcing updated medi-car, service car, and attendant rates effective with dates of services beginning January 1, 2023.

The Transportation Fee Schedule: <u>Transportation | HFS (illinois.gov)</u>

Kentucky Medicaid

- ➤ LRR-2022-MCD-6245595- The Cabinet for Health and Family Services (CHFS) released an email to advise that the Department is in process of completing Change Order (CO) 34241 to add additional provider types to telehealth codes per the new legislation for telehealth regulation. DMS has advised of the following provider types added (effective July 1, 2022) to the contract billing rules along with the telehealth codes that were affected.
 - > PT 06, 26 and 95 for CPT codes 99453, 99454 and 99457
 - > PT 03, 06, 26, 62, 63, 66, 67, 81, 82, 83, 84, 89, and 95 for CPT code 99458

Louisiana Medicaid

➤ LRR-2022-MCD-6271675 - The Louisiana Department of Health (LDH) is sharing communication regarding the Federal COVID-19 Winter Preparedness Plan. The plan, which can be accessed by the following link, as well as key steps to mitigate the spread of COVID-19 this season:

Winter Preparedness Plan:

<u>Fact Sheet: Biden Administration Announces COVID-19 Winter Preparedness Plan | The White</u> House