CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12670	Date: June 4, 2024
	Change Request 13560

Transmittal 12547 issued March 14, 2024, is being rescinded and replaced by Transmittal 12670, dated, June 4, 2024, to revise business requirements 13560.1.1, 13560.1.1.1, 13560.1.1.5, 13560.1.2, 13560.1.2.1, 13560.1.2.3, 13560.1.3, 13560.1.3.1, 13560.1.3.3, 13560.1.4, 13560.1.4.1, 13560.1.4.3, 13560.1.5, 13560.1.5.1, 13560.1.5.3 and 13560.3. This correction also removes business requirements 13560.1.1.2, 13560.1.2.2, 13560.1.3.2, 13560.1.4.2 and 13560.1.5.2 and adds business requirements 13560.6.15 and 13560.7. All other information remains the same.

SUBJECT: July 2024 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to supply the contractors with the ASP and Not Otherwise Classified (NOC) drug pricing files for Medicare Part B drugs on a quarterly basis. The ASP payment limits are calculated quarterly based on quarterly data submitted to CMS by manufacturers.

EFFECTIVE DATE: July 1, 2024

*Unless otherwise specified, the effective date is the date of service.

IMPLEMENTATION DATE: July 1, 2024

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated) R=REVISED, N=NEW, D=DELETED-*Only One Per Row*.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	N/A

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Recurring Update Notification

Attachment - Recurring Update Notification

Pub. 100-04	Transmittal: 12670	Date: June 4, 2024	Change Request: 13560
1 UD. 100-07	11 ansimittai. 12070	Date. June 1, 2021	Change Request. 15500

Transmittal 12547 issued March 14, 2024, is being rescinded and replaced by Transmittal 12670, dated, June 4, 2024, to revise business requirements 13560.1.1, 13560.1.1.1, 13560.1.1.5, 13560.1.2, 13560.1.2.1, 13560.1.2.3, 13560.1.3, 13560.1.3.1, 13560.1.3.3, 13560.1.4, 13560.1.4.1, 13560.1.4.3, 13560.1.5, 13560.1.5.1, 13560.1.5.3 and 13560.3. This correction also removes business requirements 13560.1.1.2, 13560.1.2.2, 13560.1.3.2, 13560.1.4.2 and 13560.1.5.2 and adds business requirements 13560.6.15 and 13560.7. All other information remains the same.

SUBJECT: July 2024 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files

EFFECTIVE DATE: July 1, 2024

*Unless otherwise specified, the effective date is the date of service.

IMPLEMENTATION DATE: July 1, 2024

I. GENERAL INFORMATION

A. Background: The ASP methodology is based on quarterly data submitted to the CMS by manufacturers. CMS will supply the contractors with the ASP and Not Otherwise Classified (NOC) drug pricing files for Medicare Part B drugs on a quarterly basis. Payment allowance limits under the Outpatient Prospective Payment System (OPPS) are incorporated into the Outpatient Code Editor (OCE) through separate instructions that can be located in chapter 4, section 50 of the Internet-only Manual.

B. Policy: This recurring update addresses the following pricing files:

File: July 2024 ASP and ASP NOC -- Effective Dates of Service: July 1, 2024, through September 30, 2024

File: April 2024 ASP and ASP NOC -- Effective Dates of Service: April 1, 2024, through June 30, 2024

File: January 2024 ASP and ASP NOC -- Effective Dates of Service: January 1, 2024, through March 31, 2024

File: October 2023 ASP and ASP NOC -- Effective Dates of Service: October 1, 2023, through December 31, 2023

File: July 2023 ASP and ASP NOC -- Effective Dates of Service: July 1, 2023, through September 30, 2023

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility									
		A/B MAC			DM	5	n	Oth			
					Е			er			
		A	В	НН		FIS	MC	VM	CW		
				Н	MA	S	S	S	F		
					С						
13560.1	The Virtual Data Center (VDC) shall									VD	
	have available via the CMS Virtual									C	

Number	Requirement	Re	espo	nsibil	ity					
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	Data Center (CDC) the ASP drug pricing files for Medicare Part B drugs for the July 2024 file and, if released, the revised April 2024, January 2024, October 2023, and July 2023 files.									
13560.1. 1	The contractor shall download the July 2024 ASP drug pricing file through the CDC on or after June 20, 2024.				X					
13560.1. 1.1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.JUL. Q.V0620				X					
13560.1. 1.2	This business requirement has been deleted.	X		X						
13560.1. 1.3	The contractors shall retrieve the July 2024 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024.	X	X	X	X					
13560.1. 1.4	The contractors shall use the July 2024, ASP and NOC drug pricing files to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024 with dates of service July 1, 2024, through September 30, 2024.	X	X	X	X					
13560.1. 1.5	The contractors shall use the July 2024 ASP drug pricing file to update the drug payment limits for claims for infusion drugs furnished through a covered item of Durable Medical Equipment (DME) processed or reprocessed on or after July 1, 2024, with dates of service on or after July 1, 2024.	X	X	X	X					
13560.1. 2	The contractor shall download the revised April 2024 ASP drug pricing file through the CDC on or after June 20, 2024, if released by CMS.				X					
13560.1. 2.1	The contractor shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.APR				X					

Number	Requirement	Responsibility								
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	.Q.V0620.									
13560.1. 2.2	This business requirement has been deleted.	X		X						
13560.1. 2.3	The contractor shall overlay or manually update the previous April 2024 file with the new April 2024 ASP drug pricing file, if released by CMS.				X					
13560.1. 2.4	The contractors shall use the revised April 2024 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service April 1, 2024, through June 30, 2024, if released by CMS.	X	X	X	X					
13560.1. 2.5	The contractors shall retrieve the revised April 2024 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024, if released by CMS.	X	X	X	X					
13560.1. 2.6	The contractors shall use the revised April 2024 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service April 1, 2024, through June 30, 2024, if released by CMS.	X	X	X	X					
13560.1.	The contractor shall download the revised January 2024 ASP drug pricing file through the CDC on or after June 20, 2024, if released by CMS.				X					
13560.1. 3.1	The contractor shall retrieve Final File: MU00.@BF12390.ASP.R2.CY24.JAN, Q.V0620.				X					
13560.1. 3.2	This business requirement has been deleted.	X		X						

Number	Requirement	Responsibility								
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13560.1. 3.3	The contractor shall overlay or manually update the previous January 2024 file with the new January 2024 ASP drug pricing file, if released by CMS.				X					
13560.1. 3.4	The contractors shall use the revised January 2024 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service January 1, 2024, through March 31, 2024, if released by CMS.	X	X	X	X					
13560.1. 3.5	The contractors shall retrieve the revised January 2024 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024, if released by CMS.	X	X	X	X					
13560.1. 3.6	The contractors shall use the revised January 2024 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service January 1, 2024, through March 31, 2024, if released by CMS.	X	X	X	X					
13560.1. 4	The contractor shall download the revised October 2023 ASP drug pricing file through the CDC on or after June 20, 2024, if released by CMS.				X					
13560.1. 4.1	The contractor shall retrieve Final File: MU00.@BF12390.ASP.R2.CY23.OCT .Q.V0620.				X					
13560.1. 4.2	This business requirement has been deleted.	X		X						
13560.1. 4.3	The contractor shall overlay or manually update the previous October 2023 file with the new October 2023 ASP drug pricing file, if released by CMS.				X					

Number	Requirement	Responsibility								
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13560.1. 4.4	The contractors shall use the revised October 2023 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service October 1, 2023, through December 31, 2023, if released by CMS.	X	X	X	X					
13560.1. 4.5	The contractors shall retrieve the revised October 2023 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024, if released by CMS.	X	X	X	X					
13560.1. 4.6	The contractors shall use the revised October 2023 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service October 1, 2023, through December 31, 2023, if released by CMS.	X	X	X	X					
13560.1. 5	The contractor shall download the revised July 2023 ASP drug pricing file through the CDC on or after June 20, 2024, if released by CMS.				X					
13560.1. 5.1	The contractor shall retrieve Final File: MU00.@BF12390.ASP.R2.CY23.JUL. Q.V0620				X					
13560.1. 5.2	This business requirement has been deleted.	X		X						
13560.1. 5.3	The contractor shall overlay or manually update the previous July 2023 file with the new July 2023 ASP drug pricing file, if released by CMS.				X					
13560.1. 5.4	The contractors shall use the revised July 2023 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service July 1, 2023, through September 30,	X	X	X	X					

Number	Requirement	Re	espo	nsibili	ity					
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	2023, if released by CMS.									
13560.1. 5.5	The contractors shall retrieve the revised July 2023 ASP NOC pricing file from the CMS ASP webpage on or after June 20, 2024, if released by CMS.	X	X	X	X					
13560.1. 5.6	The contractors shall use the revised July 2023 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024, with dates of service July 1, 2023, through September 30, 2023, if released by CMS.	X	X	X	X					
13560.2	The contractors shall not search and adjust claims that have already been processed unless brought to their attention.	X	X	X	X					
13560.3	The contractors shall notify CMS of successful receipt via email to price_file_receipt@cms.hhs.gov stating the name of the file received, (e.g., Clinical Laboratory Fee Schedule (CLAB), ASP, etc.) and the entity for which it was received (i.e., include states, carrier numbers, quarter, and if Part A, Part B, or both).				X					
13560.4	The ASP and NOC drug pricing files will contain the applicable payment allowance limits (i.e., 106% ASP, 106% Wholesale Acquisition Cost (WAC), or 95% Average Wholesale Price (AWP)); therefore, Medicare contractors shall not make any additional payment calculations.	X	X	X	X					
13560.5	For any drug or biological not listed in the ASP or NOC drug pricing files, the contractors shall determine the payment allowance limits in accordance with the policy described in the Medicare Claims Processing Manual, chapter 17, section 20.1.3.	X	X	X	X					

Number	Requirement	Responsibility								
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				Н	MA C	S	S	S	F	
13560.5.	For any drug or biological not listed in	X	X	X	X					
1	the ASP or NOC drug pricing files that are billed with the KD modifier, the									
	contractors shall determine the payment									
	allowance limits in accordance with									
	instructions for pricing and payment									
	changes for infusion drugs furnished									
	through an item of durable medical									
	equipment on or after January 1, 2017,									
	associated with the passage of the 21st									
	Century Cures Act.									
13560.6	The contractors shall use the most	X	X	X	X					
	current version available of the Medicare Contractor Reporting									
	Template for Part B drugs to report									
	information on Medicare Part B drugs									
	not paid on a cost or prospective									
	payment basis when payment limits are									
	not listed in the quarterly drug pricing									
	ASP and NOC files, or in the OPPS Pricer.									
	Tricer.									
13560.6.	The contractors shall use the template	X	X	X	X					
1	to report pricing information for:									
	 NOC drugs not included on the 									
	Medicare Part B NOC pricing									
	file									
	any Healthcare Common									
	Procedure Coding System									
	(HCPCS) drug codes not on the									
	ASP file, and									
	 OPPS drugs not in the OPPS 									
	Pricer.									
13560.6.	The contractors shall list all drugs that	X	X	X	X					
2	were priced since the last submitted									
	report.									
13560.6.	The contractors shall list each drug	X	X	X	X					
3	priced on the report only once.									

Number	Requirement	Re	espo	nsibili	ity					
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13560.6. 4	For compounded drugs, the contractors shall report the name of each drug in the compounded product.	X	X	X	X					
13560.6. 5	The contractors shall prepare and submit the reports so that each report covers approximately 30 days of pricing activity.	X	X		X					
13560.6. 6	The contractors shall report drugs omitted from previous reports in the next report.	X	X	X	X					
13560.6. 7	The contractors shall complete the report in its entirety.	X	X	X	X					
13560.6. 8	The contractors shall not report radiopharmaceuticals.		X							
13560.6. 9	The contractors shall report pricing information for drugs, biologicals, and radiopharmaceuticals that are billed using C9399.	X		X						
13560.6. 10	The contractors shall download the most current version available of the template from the CMS website at https://www.cms.gov/Medicare/Medica re-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice.	X	X	X	X					
13560.6. 11	The contractors shall complete the template on a monthly basis.	X	X	X	X					
13560.6. 12	The contractors shall ensure that the format of the template is Microsoft Excel.	X	X	X	X					
13560.6. 13	The contractors shall send the completed template to sec303aspdata@cms.hhs.gov on the first business day of the month.	X	X	X	X					
13560.6. 14	The contractor shall send an email to Sec303aspdata@cms.hhs.gov stating that the contractor has no drug pricing to report, if the contractor has not priced any drugs since the last submitted report, in lieu of using the	X	X	X	X					

Number	Requirement	Responsibility										
		A	/B N	MAC	DM E		Oth er					
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F	, GI		
	template.											
13560.6. 15	The contractor shall use the cloud fee schedule to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2024.	X	X	X								
13560.7	The contractors shall be aware of any new CPT/HCPCS codes and any deleted/terminated codes as applicable listed on the add/change/delete report to update the system as necessary.	X	X			X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
			A/B MAC		DME MAC	CEDI
		A	В	ННН	WILC	
13560.8	Medicare Learning Network® (MLN): CMS will develop and release national provider education content and market it through the MLN Connects® newsletter shortly after we issue the CR. MACs shall link to relevant information on your website and follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 for distributing the newsletter to providers. When you follow this manual section, you don't need to separately track and report MLN content releases. You may supplement with your local educational content after we release the newsletter.	X	X	X	X	

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

[&]quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

V. CONTACTS

Pre-Implementation Contact(s): Felicia Brown, 410-786-9287 or felicia.brown@cms.hhs.gov , Prabath Malluwa-wadu, 410-786-4620 or prabath.malluwa-wadu@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0