
CMS Manual System

Pub. 100-20 One-Time Notification

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

Transmittal 123

Date: OCTOBER 29, 2004

CHANGE REQUEST 3533

SUBJECT: Instructions For Pricing Treprostinil (Q4077)

I. SUMMARY OF CHANGES: This one time notification instructs the Durable Medical Equipment Regional Carriers (DMERCs) to use the 2004 MMA Payment Limits Pricing File when pricing the drug, Treprostinil (Q4077).

NEW/REVISED MATERIAL - EFFECTIVE DATE*: January 1, 2004

IMPLEMENTATION DATE: November 29, 2004

Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. 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 not updated.*)
(R = REVISED, N = NEW, D = DELETED) – (*Only One Per Row.*)

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

III. FUNDING: Medicare contractors shall implement these instructions within their current operating budgets.

IV. ATTACHMENTS:

| | |
|---|-------------------------------|
| | Business Requirements |
| | Manual Instruction |
| | Confidential Requirements |
| X | One-Time Notification |
| | Recurring Update Notification |

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

Attachment – One-Time Notification

| | | | |
|-------------|------------------|------------------------|---------------------|
| Pub. 100-20 | Transmittal: 123 | Date: October 29, 2004 | Change Request 3533 |
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SUBJECT: Instructions For Pricing Treprostinil (Q4077)

I. GENERAL INFORMATION

This one time notification instructs the Durable Medical Equipment Regional Carriers (DMERCs) to use the 2004 MMA Payment Limits Pricing File when pricing the drug Treprostinil (Q4077). The 2004 MMA Payment Limits Pricing File is available at www.cms.hhs.gov/providers/drugs/default.asp. The 2004 pricing allowance for Treprostinil (Q4077) is \$61.75.

Provider Education: A Medlearn Matters provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article must be included in your next regularly scheduled bulletin. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

| Requirement Number | Requirements | Responsibility ("X" indicates the columns that apply) | | | | | | | | |
|--------------------|---|---|------|---------|-------|---------------------------|-----|-----|-----|-------|
| | | FI | RHHI | Carrier | DMERC | Shared System Maintainers | | | | Other |
| | | | | | | FISS | MCS | VMS | CWF | |
| 3533.1 | DMERCs shall use the specific payment for HCPCs drug code Q4077 located in the 2004 MMA Payment Limits Pricing File. | | | X | | | | | | |
| 3533.2 | Contractors shall not search their files to either retract payment for claims already paid or to retroactively pay claims. However, contractors shall adjust claims brought to their attention. | | | X | | | | | | |

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

| X-Ref Requirement # | Instructions |
|----------------------------|---------------------|
| | |

B. Design Considerations: N/A

| X-Ref Requirement # | Recommendation for Medicare System Requirements |
|----------------------------|--|
| | |

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

| | |
|---|--|
| Effective Date* : January 1, 2004 Implementation Date: November 29, 2004 Pre-Implementation Contact(s): Angela Mason, 410-786-7452 Post-Implementation Contact(s): Appropriate Regional Office | Medicare contractors shall implement these instructions within their current operating budgets. |
|---|--|

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