

Connecticut Medical Assistance Program Policy Transmittal 2015-30

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Roderick L. Bremby, Commissioner

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Effective Date: October 1, 2015 Contact: Nina Holmes @860-424-5486

TO: Dialysis Clinics

RE: Addition of Code Q4081 to Dialysis Clinic Fee Schedule

Effective for the dates of service October 1, 2015 and forward, Healthcare Common Procedure Coding System (HCPCS) code Q4081 will replace HCPCS code J0886 on the Dialysis Clinic fee schedule.

HCPCS Code	Description	Units	Rates
J0886	Injection, epoetin alfa, 1000 units (for ESRD on dialysis)	1000	\$10.39 (Medicaid, 2015)
Q4081	Injection, epoetin, alfa, 100 units (for ESRD on dialysis)	100	\$1.04 (Medicare ASP rate, April 2013)

The Department is replacing J0886 with Q4081 to more closely mirror how claims are submitted to Medicare and to allow providers to provide more detail when billing the units administered during a dialysis session. The Department will utilize the 2013 Medicare Average Sale Price (ASP) rate.

Providers should make the necessary changes when billing epoetin alpha for all dialysis claims to the Connecticut Medical Assistance Program for all HUSKY Health members (HUSKY A, B, C, and D) and Medicare crossover claims. **<u>Posting Instructions</u>:** Policy transmittals can be downloaded from the Web site at <u>www.ctdssmap.com</u>.

Distribution: This policy transmittal is being distributed by HP Enterprise Services to providers enrolled in the Connecticut Medical Assistance Program.

<u>Responsible Unit</u>: DSS, Division of Health Services, Medical Policy and Regulations, Nina Holmes, Medical Policy Consultant Medical Policy at (860) 424-5486.

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