
Ambulatory Surgical Center Reimbursement Guide



This billing guide is intended solely for use as an informational tool to assist ambulatory surgical center billing staff with reimbursement issues. The coverage, coding, and payment information included in this guide has been compiled from various resources and is current as of March 31, 2009; however, this information is subject to change and should not be construed as legal advice. Providers should exercise independent clinical judgment when selecting codes and submitting claims to reflect accurately the services rendered to individual patients. Baxter Healthcare Corporation does not guarantee success in obtaining insurance payments. Third-party payment for medical products and services is affected by numerous factors, not all of which can be anticipated or resolved by Baxter Healthcare Corporation. Providers are encouraged to contact third-party payers for specific information on their coverage, coding, and payment policies.

Coverage

Baxter Healthcare Corporation is pleased to provide the **hylanex** recombinant Ambulatory Surgical Center (ASC) Reimbursement Guide. Baxter has created this guide specifically for our ASC customers to explain how **hylanex** recombinant (hyaluronidase human injection) is reimbursed under Medicare's ASC payment system.

Product Overview

hylanex recombinant is the first and only human recombinant hyaluronidase enzyme. **hylanex** recombinant has been approved by the U.S. Food and Drug Administration (FDA) for the following indications:

- as an adjuvant to increase the absorption and dispersion of other injected drugs;
- for subcutaneous (SubQ) fluid administration; and
- as an adjunct in SubQ urography for improving resorption of radiopaque agents.

Mechanism of Action

hylanex recombinant temporarily clears a path through subcutaneous tissue to facilitate fluid absorption into the bloodstream.

Medicare coding and payment for **hylanex** recombinant in the ASC

Medicare continues to provide separate payment for certain drugs and biologicals in the ASC setting. This reimbursement guide focuses on coding and payment for **hylanex** recombinant under Medicare's ASC payment system.

CMS issued a unique HCPCS J-code for **hylanex** recombinant:

HCPCS	Description
J3473	Injection, hyaluronidase, recombinant, 1 USP unit

HCPCS code J3473 is used to specifically identify **hylanex** recombinant on Medicare claim forms. Medicare has recognized J3473 in the ASC setting since January 1, 2008. Providers should report 1 unit of J3473 for each USP Unit of **hylanex** recombinant administered, per the code descriptor; this means that 150 units of J3473 should be reported for each 150 USP Unit vial of Hylanex.

hylanex recombinant continues to be eligible for separate Medicare payment in the ASC setting.

Separate payment for **hylanex** recombinant in the ASC first took effect on January 1, 2008, when the Centers for Medicare and Medicaid Services (CMS) implemented a new payment system for ASCs. Under the new ASC payment system, Medicare reimburses ASCs for separately payable drugs using the average sales price (ASP) methodology. CMS calculates an ASP-based payment amount for most separately payable drugs based on manufacturer-submitted sales data. Payment amounts under the ASP methodology are updated quarterly and calculations may differ from one quarter to the next based on sales, discounts, and rebates.

The Medicare payment amount for **HYLENEX** recombinant is set at ASP plus 4 percent.

The ASP-plus-4 percent payment rate applies to most separately payable drugs and biologicals in the ASC setting. In order to receive appropriate reimbursement for **hylanex** recombinant, it is important for providers to report 1 unit of HCPCS code J3473 for each USP Unit of **hylanex** recombinant administered, as discussed above. The latest Medicare payment amounts for drugs and biologicals in the ASC are listed in Addendum BB (updated quarterly) on the CMS Website: http://www.cms.hhs.gov/ASCPayment/11_Addenda_Updates.asp#TopOfPage.

Like other drugs and biologicals, *hylanex* recombinant must be provided integral to an ASC-covered surgical procedure in order to qualify for separate Medicare payment in the ASC.

CMS considers a drug or biological to be integral to a covered surgical procedure if it is required for the successful performance of the surgery and is provided to the beneficiary in the ASC immediately preceding, during, or immediately following the covered surgical procedure. ASC claims for drugs will not be paid if they do not include a Current Procedural Terminology (CPT) code for a surgical procedure that has been approved for payment in the ASC setting.

ASC-covered surgical procedures that may be relevant to the administration of *hylanex* recombinant include the following:

CPT	Descriptor
67500	Retrobulbar injection, medication (separate procedure, does not include supply of medication)
67515	Injection of medication or other substance into Tenon’s capsule

In some cases, Correct Coding Initiative (CCI) edits may prevent these injection services from being billed with certain other procedures that have been approved for payment in the ASC, such as cataract surgery. However, only one ASC-covered surgical procedure CPT code is needed to trigger payment for separately payable drugs like *hylanex* recombinant. A complete list of ASC-covered surgical procedures can be found by downloading Addendum AA (updated quarterly) from the CMS Website: http://www.cms.hhs.gov/ASCPayment/11_Addenda_Updates.asp#TopOfPage

CPT codes 67500 and 67515 are two examples of administration codes that potentially may apply when *hylanex* recombinant is used for ophthalmology indications. However, these codes may not always be appropriate. Providers should consult a current CPT manual and always select the CPT code that accurately identifies the service provided.

Medicare CMS-1500 claims for *hylanex* recombinant in the ASC should include the following :

HCPCS Code for <i>hylanex</i> recombinant	<ul style="list-style-type: none"> ◦ Report <i>hylanex</i> recombinant with J3473 per 1 USP unit. <input type="checkbox"/> In Form Locator 24D, enter HCPCS code J3473 <input type="checkbox"/> In Form Locator 24G, enter appropriate number of HCPCS units (for example, 150 units of J3473 for a 150 USP Unit vial)
CPT Code(s)	<ul style="list-style-type: none"> ◦ Select the CPT code(s) that accurately describes the service(s) performed. ◦ Only ASC-covered surgical procedures will qualify for separate payment for <i>hylanex</i> recombinant. <input type="checkbox"/> In Form Locator 24D, enter appropriate CPT code(s) <input type="checkbox"/> In Form Locator 24G, enter appropriate number of units
ICD-9-CM Diagnosis Code(s)	<ul style="list-style-type: none"> ◦ Clinicians should document the proper ICD-9-CM diagnosis code(s) that reflect the particular patient’s condition. ◦ Medicare contractors may limit coverage of <i>hylanex</i> recombinant to FDA-approved indications <input type="checkbox"/> In Form Locator 21, enter appropriate ICD-9-CM diagnosis code(s)

Indications

HYLENEX recombinant (hyaluronidase human injection) is indicated as an adjuvant to increase the absorption and dispersion of other injected drugs; for subcutaneous fluid administration; and as an adjunct in subcutaneous urography for improving resorption of radiopaque agents.

Important Risk Information

- Hypersensitivity to hyaluronidase or any other ingredient in the formulation is a contraindication to the use of this product.
- Discontinue HYLENEX recombinant (hyaluronidase human injection) if sensitization occurs.
- Hyaluronidase should not be used to enhance the absorption and dispersion of dopamine and/or alpha agonist drugs.
- Hyaluronidase should not be injected into or around an infected or acutely inflamed area because of the danger of spreading a localized infection.
- Hyaluronidase should not be used to reduce the swelling of bites or stings.
- Hyaluronidase should not be applied directly to the cornea.
- Hyaluronidase should not be used for intravenous injections because the enzyme is rapidly inactivated.
- Furosemide, the benzodiazepines and phenytoin have been found to be incompatible with hyaluronidase.
- The most frequently reported adverse experiences have been local injection site reactions.
- Hyaluronidase has been reported to enhance the adverse events associated with co-administered drug products.
- Allergic reactions (urticaria or angioedema) have been reported in less than 0.1% of patients receiving hyaluronidase.
- Anaphylactic-like reactions following retrobulbar block or intravenous injections have occurred, rarely.
- When hyaluronidase is added to a local anesthetic agent, it hastens the onset of analgesia and tends to reduce the swelling caused by local infiltration, but the wider spread of the local anesthetic solution increases its absorption; this shortens its duration of action and tends to increase the incidence of systemic reaction.
- Edema has been reported most frequently in association with subcutaneous fluid administration.
- The rate and volume of subcutaneous fluid administration should not exceed those employed for intravenous infusion. As with all parenteral fluid therapy, use the same precautions for restoring fluid and electrolyte balance.
- During subcutaneous fluid administration, special care must be taken in pediatric patients to avoid over hydration by controlling the rate and total volume of the infusion.
- When solutions devoid of inorganic electrolytes are given subcutaneously, hypovolemia may occur.

hyleneX recombinant reimbursement by non-Medicare payers will vary; please check with your specific payers to determine whether they accept HCPCS codes and how they reimburse for **hyleneX** recombinant. For additional assistance, please call Baxter Healthcare Corporation's Reimbursement Support Line at **1-888-338-0001**.

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²The information in this reimbursement guide applies only to ASC facility services; physicians bill separately for their professional services.