



News Flash – *The Medicare Appeals Process: Five Levels to Protect Providers, Physicians and Other Suppliers* brochure has been updated and is now available to order print copies or as a downloadable PDF file. To view the PDF file, go to <http://www.cms.hhs.gov/MLNProducts/downloads/MedicareAppealsProcess.pdf> or to order hard copies, please visit the MLN Product Ordering Page at http://cms.meridianksi.com/kc/main/kc_frame.asp?kc_ident=kc0001&loc=5 on the CMS website.

MLN Matters Number: MM5923

Related Change Request (CR) #: 5923

Related CR Release Date: March 14, 2008

Effective Date: January 1, 2008

Related CR Transmittal #: R1478CP

Implementation Date: April 14, 2008

Additional Clarification to Chapter 17, Section 40, Regarding Processing of Drug Claims with the JW Modifier

Provider Types Affected

Physicians, providers and suppliers billing Medicare Contractors (Medicare Administrative Contractors (A/B MACs), fiscal intermediaries (FIs), carriers and/or Durable Medical Equipment Medicare Administrative Contractors (DME MACs)) for drugs or biologicals provided to Medicare beneficiaries.

Impact on Providers

When processing all drugs **except those provided under the Competitive Acquisition Program (CAP)** for Part B drugs and biologicals, Medicare contractors may require the use of the modifier JW to identify unused drug or biologicals from single use vials or single use packages that are appropriately discarded. **This modifier will provide payment for the discarded drug or biological.**

Background

The Centers for Medicare & Medicaid Services (CMS) issued this CR 5923 to notify providers of the *Medicare Claims Processing Manual* update that clarifies the use of the JW modifier when processing all drugs except CAP drugs.

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This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Additional Information

To see the official instruction (CR5923) issued to your Medicare Carrier, DME/MAC, FI and/or A/B MAC, visit <http://www.cms.hhs.gov/Transmittals/downloads/R1478CP.pdf> on the CMS website.

If you have questions, please contact your Medicare Carrier, DME/MAC, FI and/or A/B MAC at their toll-free number which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

News Flash - **It's Not Too Late to Give and Get the Flu Shot!** In the U.S., the peak of flu season typically occurs anywhere from late December through March; however, flu season can last as late as May. Each office visit presents an opportunity for you to talk with your patients about the importance of getting an annual flu shot and a one time pneumococcal vaccination. Protect yourself, your patients, and your family and friends by getting and giving the flu shot. **Don't Get the Flu. Don't Give the Flu. Get Vaccinated!** Remember - Influenza and pneumococcal vaccinations and their administration are covered Part B benefits. Note that influenza and pneumococcal vaccines are NOT Part D covered drugs. You and your staff can learn more about Medicare's coverage of adult immunizations and related provider education resources, by reviewing Special Edition MLN Matters article SE0748 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0748.pdf> on the CMS website.

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