CMS Manual System

Pub 100-02 Medicare Benefit Policy

Transmittal 35

Department of Health & Human Services
Center for Medicare and & Medicaid Services
Date: JUNE 3, 2005
Change Request 3802

SUBJECT: Automated Multi-Channel Chemistry (AMCC) for Continuous Ambulatory Peritoneal Dialysis (CAPD) and Non-CAPD Patients

I. SUMMARY OF CHANGES: Intermediary billing guidelines for compliance with the payment policy for End Stage Renal Disease-related Automated Multi-Channel Chemistry Tests (i.e., the ESRD 50/50 rule) have been in effect since October 2003, with the implementation of change request (CR) 2277 and CR 3130. This transmittal makes corrections to the Internet Only Manual to indicate the AMCC tests that are included in the composite rate for Continuous Ambulatory Peritoneal Dialysis (CAPD) and Non-CAPD patients, in accordance with previously issued intermediary guidelines.

NEW/REVISED MATERIAL:

EFFECTIVE DATE: July 5, 2005

IMPLEMENTATION DATE: July 5, 2005

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**

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE					
R	11/30.2.2/Automated Multi-Channel Chemistry (AMCC) Tests					

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.

IV. ATTACHMENTS:

Business Requirements

Manual Instruction

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

Attachment - Business Requirements

Pub. 100-02 | Transmittal: 35 | Date: June 3, 2005 | Change Request 3802

SUBJECT: Automated Multi-Channel Chemistry (AMCC) for Continuous Ambulatory Peritoneal Dialysis (CAPD) and Non-CAPD Patients

I. GENERAL INFORMATION

A. Background: Medicare's composite rate payment to an End Stage Renal Disease (ESRD) facility or monthly capitation payment (MCP) to a physician includes reimbursement for certain routine clinical laboratory tests furnished to an ESRD beneficiary. However, separate payment for such clinical laboratory tests may be made when more than 50 percent of all Medicare-covered laboratory services furnished on a particular date of service are Automated Multi-channel Chemistry (AMCC) tests that are not included in the composite payment rate. When the 50 percent threshold is met (for a particular date of service), then all laboratory tests (composite payment rate and non-composite payment rate tests) furnished on that date are separately payable. Conversely, if the 50 percent threshold is not met (for a particular date of service) then no laboratory tests (including non-composite payment rate tests) furnished on that date of service are separately payable. Medicare's payment policy for ESRD-related laboratory services is referred to as the "ESRD 50/50 rule."

The laboratory tests subject to the ESRD 50/50 rule are those tests that are included within AMCC tests and then only when furnished to an ESRD beneficiary based upon an order by a doctor rendering care in the dialysis facility or by an MCP physician at the dialysis facility for the diagnosis and treatment of the beneficiary's ESRD. (**NOTE:** Tests ordered by the MCP physician outside of the dialysis clinic are not subject to the ESRD 50/50 rule.)

Intermediary billing guidelines for compliance with the ESRD 50/50 rule have been in effect since October 2003, with the implementation of change request (CR) 2277 and CR 3130. This instruction makes corrections to Pub. 100-02, Medicare Benefit Policy Manual, Chapter 11, §30.2.2 to indicate the allowed frequencies for AMCC tests provided to CAPD patients and Non-CAPD patients when these tests are separately billable for a particular date of service, in accordance with the ESRD 50/50 rule. See Pub. 100-04, Medicare Claims Processing Manual, Chapter 8, §60.1 and Chapter 16, §40.6.1, for additional billing and payment instructions as well as examples of the 50/50 rule.

B. **Policy:** Clinical diagnostic laboratory tests included under the composite rate payment are paid through the composite rate paid by the intermediary. To determine if separate payment is allowed for non-composite rate tests for a particular date of service, 50 percent or more of the covered tests must be non-composite rate tests. When these tests are separately payable for a particular date of service, intermediaries shall allow payment for AMCC tests at the frequencies specified in Pub. 100-02, Medicare Benefit Policy Manual, Chapter 11, §30.2.2.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

[&]quot;Should" denotes an optional requirement

Requirement	Requirements	Responsibility ("X" indicates the							
Number		columns that apply)							
		F I	R H H I	C a r r i e r	D M E R C		Systemers V M S	C W F	Other
3802.1	When AMCC tests are separately payable for a particular date of service, in accordance with the ESRD 50/50 rule, intermediaries shall allow payment for these tests at the frequencies specified in Pub. 100-02, Medicare Benefit Policy Manual, Chapter 11, §30.2.2.	X							

III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)							
		F I	R H H I	C a r r i e r	D M E R C		iners	С	Other
	None.								

IV. 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

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: July 5, 2005

Implementation Date: July 5, 2005

Pre-Implementation Contact(s): Joan Proctor-

Young, (410) 786-0949

Post-Implementation Contact(s): Jacqueline

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No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.

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30.2.2 - Automated Multi-Channel Chemistry (AMCC) Tests

(Rev. 35, Issued: 06-03-05; Effective: 07-05-05; Implementation: 07-05-05)

Clinical diagnostic laboratory tests included under the composite rate payment are paid through the composite rate paid by the intermediary. To determine if separate payment is allowed for non-composite rate tests for a particular date of service, 50 percent or more of the covered tests must be non-composite rate tests.

Medicare will apply the following to AMCC tests for ESRD beneficiaries:

- 1. Payment is the lowest rate for services performed by the same provider, for the same beneficiary, for the same date of service.
- 2. The intermediary must identify for a particular date of service the AMCC tests ordered that are included in the composite rate and those that are not included. The composite rate tests are defined for Hemodialysis, Intermittent Peritoneal Dialysis (IPD), Continuous Cycling Peritoneal Dialysis (CCPD), and Hemofiltration (Attachment 1) and for Continuous Ambulatory Peritoneal Dialysis (CAPD) (Attachment 2).
- 3. If 50 percent or more of the covered tests are included under the composite rate payment, then all submitted tests are included within the composite payment. In this case, no separate payment in addition to the composite rate is made for any of the separately billable tests.
- 4. If less than 50 percent of the covered tests are composite rate tests, all AMCC tests submitted for that Date of Service (DOS) are separately payable.
- 5. A non-composite rate test is defined as any test separately payable outside of the composite rate or beyond the normal frequency covered under the composite rate that is reasonable and necessary.

Three pricing modifiers discretely identify the different payment situations for ESRD AMCC tests. The physician that orders the tests is responsible for identifying the appropriate modifier when ordering the tests.

- CD AMCC test has been ordered by an ESRD facility or MCP physician that is part of the composite rate and is not separately billable
- CE AMCC test has been ordered by an ESRD facility or MCP physician that is a composite rate test but is beyond the normal frequency covered under the rate and is separately reimbursable based on medical necessity
- CF AMCC test has been ordered by an ESRD facility or MCP physician that is not part of the composite rate and is separately billable

ESRD clinical diagnostic laboratory tests identified with modifiers "CD", "CE" or "CF" may not be billed as organ or disease panels. Effective October 1, 2003, all ESRD clinical diagnostic laboratory tests must be billed individually. See *Pub. 100-04*, Medicare Claims Processing Manual, Chapter 8, for additional billing and payment instructions as well as examples of the 50/50 rule.

Composite Rate Tests for Hemodialysis, IPD, CCPD, and Hemofiltration (Items in bold are non composite rate test)

Chemistry	CPT Code	Monthly	Weekly	13 x Quarter
Albumin	82040	X		
Alkaline Phosphatase	84075	X		
ALT (SGPT)	84460			
AST (SGOT)	84450	X		
Bilirubin, total	82247			
Bilirubin, direct	82248			
Calcium	82310	X		
Chloride	82435	X		
Cholesterol	82465			
СК, СРК	82550			
CO2 (bicarbonate)	82374	X		
Creatinine	82565		X	
GGT	82977			
Glucose	82947			
LDH	83615	X		
Phosphorus	84100	X		
Potassium	84132	X		
Protein, total	84155	X		
Sodium	84295			
Triglycerides	84478			
Urea nitrogen (BUN)	84520			X
Uric Acid	84550			

Composite Rate Tests for CAPD (Items in **bold** are non composite rate test)

Chemistry	CPT Code	Monthly	Weekly	13 x Quarter
Albumin	82040	X		
Alkaline Phosphatase	84075	X		
ALT (SGPT)	84460			
AST (SGOT)	84450	X		
Bilirubin, total	82247			
Bilirubin, direct	82248			
Calcium	82310	X		
Chloride	82435			
Cholesterol	82465			
СК, СРК	82550			
CO2 (bicarbonate)	82374	X		
Creatinine	82565	X		
GGT	82977			
Glucose	82947			
LDH	83615	X		
Phosphorus	84100	X		
Potassium	84132	X		
Protein, total	84155	X		
Sodium	84295	X		
Triglycerides	84478			
Urea nitrogen (BUN)	84520	X		
Uric Acid	84550			