



Intravenous Immune Globulin (IVIG) Demonstration

Created by NHIC-IVIG Demonstration Support Contractor
Jurisdiction A DME MAC-September 2014
Updated by Noridian-June, 2016 and November, 2017

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 - Changes have been made as appropriate to reflect current information and remove “obsolete” enrollment information

Agenda

- Overview
- Beneficiary Eligibility
- How to Apply
- Supplier Eligibility
- Billing
- Resources

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IVIIG Demonstration Overview

Overview

- The “*Medicare IVIG Access and Strengthening Medicare and Repaying Taxpayers Act of 2012*” authorized the demonstration under Part B of Title 18 of the Social Security Act
 - Three year demonstration
 - Limited to no more than 4,000 beneficiaries
 - \$45 million budget
 - Participation is voluntary and may be terminated by the beneficiary at any time

Overview [2]

- Under the demonstration:
 - Medicare will issue under Part B a bundled payment for items and services that are necessary to administer IVIG for the treatment of Primary Immune Deficiency Disease (PIDD) in the home to enrolled beneficiaries who are not homebound
 - No changes are being made to existing coverage of IVIG or subcutaneous immune globulin
 - For beneficiaries that currently receive IVIG in a doctor's office/infusion center and wish to receive it at home or receive subcutaneous IVIG and wish to switch to IVIG

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Beneficiary Eligibility

Eligibility

- To be eligible for the IVIG demonstration the beneficiary must meet the following requirements:
 - Enrolled in the demonstration
 - Eligible to have the IVIG drug paid for at home
 - Enrolled in Medicare B and not enrolled in a Medicare Advantage Plan
 - Not in a home health episode on the date of service
 - The place of service must be the beneficiary's home or a setting that is "home like"

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How Beneficiaries Will Apply

How Beneficiaries Will Apply

- To participate in this demonstration a completed application form which has been signed by the physician and beneficiary must be submitted
- Submission of an application does not guarantee that a beneficiary will be accepted to participate in the demonstration
- Applications will be accepted until enrollment and/or funding limits are reached

How Beneficiaries Will Apply [2]

- Application and Application Completion Guide are located at:

<https://med.noridianmedicare.com/web/ivig/bene>

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Supplier Eligibility and Billing Requirements

Supplier Eligibility

- If the supplier is currently eligible to bill the Durable Medical Equipment Medicare Administrative Contractors (DME MACs) for IVIG, and meets all regulatory and statutory requirements to provide the administration of IVIG:
 - They can provide the items and services under this demonstration
 - No additional registration or enrollment is required

Supplier Eligibility [2]

- **Question: Is the DMEPOS (Durable Medical Equipment, Prosthetics, Orthotics and Supplies) Supplier required to be certified to bill the A/B MACs in order to provide the nursing component of the Q2052-Services, Supplies and Accessories used in the Home under the Medicare IVIG Demonstration?**
- Answer: No. The DMEPOS supplier must currently be able to bill the DME MACs (enrolled and current with the National Supplier Clearinghouse) and meet all regulatory and statutory requirements. If a State requires licensure to furnish certain items or services, a DMEPOS supplier: Must be listed to provide the item or services; and may contract with a licensed individual or other entity to provide the licensed services unless expressly prohibited by State law. A supplier may not contract with an entity that is currently excluded from the Medicare program, any State health care programs, or from any other federal procurement or non-procurement programs.

Supplier Eligibility [3]

- **Question: Can the supplier/pharmacy contract or subcontract nursing services for the administration of the IVIG to bill the Q2052-Services, Supplies and Accessories Used in the Home under the Medicare IVIG Demonstration?**
- Answer: Yes. If a State requires licensure to furnish certain items or services, a DMEPOS supplier: Must be listed to provide the item or services; and may contract with a licensed individual or other entity to provide the licensed services unless expressly prohibited by State law. A supplier may not contract with an entity that is currently excluded from the Medicare program, any State health care programs, or from any other federal procurement or non-procurement programs.

Billing Requirements

- A new “Q” code has been established for services, supplies and accessories used in the home under the Medicare IVIG demonstration:
 - **Q2052** – (Long Description) – Services, supplies and accessories used in the home under Medicare Intravenous Immune Globulin (IVIG) demonstration
 - **Q2052** – (Short Description) – IVIG demonstration, services/supplies
 - The code is for use with the IVIG demonstration only and the claims should be submitted to the DME MACs

Billing Requirements [2]

- The demonstration service code (**Q2052**) must:
 - Only be billed for beneficiaries enrolled in the demonstration
 - Be billed for dates of service on/after October 1, 2014
 - Be billed on the same claims with the same place of service
 - When the drug is mailed or delivered to the patient prior to administration, the date of service for the administration of the drug (the “Q2052” claim line) may be no more than 30 calendar days after the date of service on the drug claim line
 - Be submitted to the correct DME MAC jurisdiction based on the beneficiary’s address
- The demonstration covered services will be paid as a bundle and will be subject to coinsurance and deductible in the same manner as other Part B services

Billing Requirements [3]

- Fee schedule for **Q2052**, each time IVIG is administered
 - 2018 \$358.50
 - 2017 \$354.60
 - 2016 \$336.05
 - 2015 \$319.23
 - 2014 \$300.00
- No more than one unit of **Q2052** shall be billed per claim line
 - When billing multiple administrations of IVIG on one claim, each date of service for Q2052 must be on a separate line

Billing Requirements-Example

- 30 day supply of J1557 shipped to beneficiary that is infused every 3 weeks

24. A.	DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)				E. DIAGNOSIS POINTER	F.		G. DAYS OR UNITS	H. EPSDT Family Plan	I. ID. QUAL.	J. RENDERING PROVIDER ID. #
	From	To							CPT/HCPCS	MODIFIER				\$ CHARGES					
MM	DD	YY	MM	DD	YY														
10	03	14	10	03	14	12		J1557				A	16500	4			NPI		
10	08	14	10	08	14	12		Q2052				A	30000	1			NPI		
10	29	14	10	29	14	12		Q2052				A	30000	1			NPI		
																	NPI		
																	NPI		

Billing Requirements-Example [2]

Drugs are provided at the time of infusion

24. A. DATE(S) OF SERVICE						B.	C.	D. PROCEDURES, SERVICES, OR SUPPLIES				E.	F.		G.	H.	I.	J.
From			To			PLACE OF	EMG	(Explain Unusual Circumstances)				DIAGNOSIS	\$ CHARGES		DAYS OR UNITS	EPSDT Family Plan	ID. QUAL.	RENDERING PROVIDER ID, #
MM	DD	YY	MM	DD	YY	SERVICE		CPT/HCPCS	MODIFIER		POINTER							
10	03	14	10	03	14	12		J1557			A	89	00	2			NPI	
10	03	14	10	03	14	12		Q2052			A	300	00	1			NPI	
10	29	14	10	29	14	12		J1557			A	8900		2			NPI	
10	29	14	10	29	14	12		Q2052			A	30000		1			NPI	
																	NPI	

Billing Requirements [4]

- Immune Globulin drugs that are administered intravenously and payable under Medicare B Part for services rendered in the home of beneficiaries with PIDD (in order by HCPCS):
 - Privigen (J1459)
 - Bivigam (J1556)
 - Gammaplex (J1557)
 - Gamunex (J1561)
 - Octagam (J1568)
 - Gammagard Liquid (J1569)
 - Flebogamma (J1572)
 - Immune Globulin Not Otherwise Specified (J1566 and J1599)

Coverage of IVIG

- Important Note: Coverage of IVIG is limited to certain primary immune deficiency diseases
- Covered ICD-10 diagnosis codes for IVIG are listed in the IVIG LCD
 - Enrollment of a beneficiary in the IVIG demonstration does not mean that the diagnosis provided by the physician that signed the IVIG demonstration application is covered by Medicare
 - Physician is only attesting to the fact that they are treating the patient, the patient has primary immune deficiency disease and is a candidate for home IVIG

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IVIIG Demonstration Resources

IVIG Demonstration Resources

- General Information
 - CMS Web Site: <https://innovation.cms.gov/initiatives/IVIG/index.html>
 - Noridian Web Site: <https://med.noridianmedicare.com/web/ivig>
 - <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1424.pdf>
 - <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1610.pdf>
- Enrollment
 - IVIG Enrollment Forms and Completion Guides: <https://med.noridianmedicare.com/web/ivig/bene>

IVIG Demonstration Resources [2]

- Mailing Address for beneficiary enrollment applications:
 - Noridian Healthcare Solutions
 - IVIG Demonstration
 - PO Box 6788
 - Fargo ND 58108-6788
- Overnight mailing:
 - Noridian Healthcare Solutions
 - IVIG Demonstration
 - 900 42nd Street South
 - Fargo ND 58103

IVIG Demonstration Resources [3]

- Completed IVIG Demonstrations applications can be faxed to: 701-277-2428
- Beneficiary IVIG Demonstration Call Center:
 - 844-625-6284
 - 8:30 am – 4 pm Monday-Friday CT

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Thank you!