



Centers for Medicare & Medicaid Services Proposes Medicare Hospital Outpatient Payment Rates and Policies for CY 2021

On Monday, August 3rd, the Centers for Medicare & Medicaid Services (CMS) released a [proposed rule](#) updating Medicare payment rates and policies under the hospital outpatient prospective payment system (OPPS) and the ambulatory surgical center payment system for calendar year 2021. Significant proposals for the transfusion medicine and cellular therapy community include: (1) proposed payment policies and rates for CY 2021; (2) payment proposals for blood not otherwise classified (NOC) P9099 code; and (3) revisions to the laboratory date of service policy. Comments are due to CMS on October 5, 2020.

Proposed Payment Policies and Rates for Transfusion Medicine and Cellular Therapies

Consistent with the methodology used since 2005, CMS proposes to continue establishing separate payment rates for blood and blood products using a blood-specific cost-to-charge ratio (CCR) methodology, which uses actual or simulated CCRs from the most recently available hospital cost reports to convert hospital charges for blood and blood products to costs. CMS proposes to continue applying the blood-specific CCR methodology when calculating the costs of blood and blood products that appear on claims with services assigned to comprehensive ambulatory payment classifications (C-APCs). A C-APC is “a classification for the provision of a primary service and all adjunctive services provided to support the delivery of the primary service.” Since the costs of blood and blood products are reflected in the overall costs of the C-APCs and the proposed payment rates of the C-APCs, CMS is proposing not to make separate payments for blood and blood products when they appear on the same claims as services assigned to the C-APCs.

CMS proposes to increase payment rates for most blood products. The APC relative weights and payments for the CY 2021 proposed rule were calculated using claims from CY 2019 that were processed through December 31, 2019. Based on the claims data analysis, the agency is proposing to reduce payments for each unit of platelets (P9019), irradiated apheresis platelets (P9036), Infusion, plasma protein fraction (human), 5%, 50 ml (P9043), cryoprecipitate reduced plasma (P9044), cmv-negative irradiated apheresis platelets (P9053) and irradiated blood (P9056). Please see Table 1 for a summary of the proposed payment rates for blood and blood products.

As summarized in Table 2, CMS proposes to increase the payment rates for many transfusion, apheresis and stem cell procedures covered by the OPPS. Similarly, CMS proposes to increase payments for most transfusion laboratory services. For CY2021, CMS proposes to reassign the code for pathogen tests for platelets (P9100) from New Technology APC 1494 (New Technology – Level 1D (\$31 - \$40)) to APC 5732 (Level 2 Minor Procedures). Therefore, the proposed payment rate for P9100 is \$34.42, which is slightly lower than the \$35.50 payment rate finalized for CY 2020. Please see Table 3 for a summary of the proposed payment rates for transfusion laboratory services.

Additionally, CMS still notes that the chimeric antigen receptor (CAR) T-cell therapies (Q2041 (Axicabtagene ciloleucel car+) and Q2042 (Tisagenlecleucel car-pos t)) will continue to have pass-through payment status during CY 2020. Table 4 summarizes the proposed payment rates for CAR T-cell therapies.



Payment Proposals for Blood Not Otherwise Classified (NOC) P9099 Code

On January 1, 2020, in response to a request spearheaded by AABB, CMS established a new HCPCS code, Blood component or product not otherwise classified (P9099), which allows providers to report unclassified blood products. However, CMS assigned P9099 to status indicator “E2” (Not payable by Medicare when submitted on an outpatient claim) for CY 2020 to avoid the potential for multiple products with different costs being reported during the same period. CMS could not identify an individual blood product HCPCS code that would have a similar cost to P9099. Thus, CMS was not able to crosswalk a payment rate from an established blood product HCPCS code to P9099. As acknowledged in the proposed rule, AABB, together with organizations from the blood community expressed concerns that assigning HCPCS code P9099 to a non-payable status in the OPSS meant that hospitals would receive no payment when they used unclassified blood products. Also, as a result of the “E2” status indicator, claim lines billed with P9099 are rejected by Medicare, which prevents providers from tracking the utilization of unclassified blood products.

Due to the challenges with determining an appropriate payment rate for unclassified blood products, CMS is proposing two options:

- (1) Package the costs of unclassified blood products reported by HCPCS code P9099 into the cost of the associated primary procedure and change the status indicator for HCPCS code P9099 from “E2” (not payable by Medicare in the OPSS) to “N” (payment is packaged into other services in the OPSS); or
- (2) Make P9099 separately payable with a payment rate equivalent to the payment rate for the lowest cost blood product, Infusion, plasma protein fraction, 5%, 50 ml (P9043), with a proposed CY 2021 payment rate of \$8.02 per unit and change the status indicator for P9099 from “E2” to “R” (blood and blood products, paid under OPSS).

Both proposals would allow for tracking of the costs and utilization of unclassified blood products. For the first proposal, providers will be able to report the cost of unclassified blood products to Medicare and over time, the costs of unspecified blood products would be reflected in the payment rate for the primary medical service if the blood product remains unclassified. However, CMS anticipates that most blood products would seek and be granted more specific coding. For the second proposal, given that the crosswalked payment rate is potentially significantly lower than the cost of the product, providers may find that packaging the cost of unclassified blood products into another medical service may generate more payment for the products over time. CMS is proposing to implement the first proposal but is asking for comments to both policies proposed.

Clinical Laboratory Date of Service (DOS) Policy

All Medicare claims for laboratory services must include the date of service (DOS), which impacts billing and payment requirements. In 2018, CMS finalized an exception to the DOS policy, which would require a performing laboratory to bill Medicare directly for advanced diagnostic laboratory tests (ADLTs) and molecular pathology tests provided to beneficiaries furnished services under the OPSS when certain requirements are satisfied.

CMS proposes excluding cancer-related protein-based Multianalyte Assays With Algorithmic Analysis (MAAAs), which are not generally performed in the hospital outpatient setting, from the OPSS packaging policy, instead adding them to laboratory date-of-service (DOS) provisions. If finalized, this



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would mean that Medicare would pay for cancer-related protein-based MAAAs under the Clinical Laboratory Fee Schedule (CLFS) instead of the OPPS, and the performing laboratory would bill Medicare directly for the test if the test meets all the laboratory DOS requirements.

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AABB will be submitting comments to CMS on the proposed rule. If you have any feedback that you would like for AABB to consider or if you have any questions on the proposed rule, please email govt_and_legal@aabb.org.



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Table 1. Blood and Blood Products

HCPCS Code	Short Descriptor	2021 SI	2020 APC	2021 APC	Final 2020 Payment	Proposed CY 2021 Payment Rate	\$ Change 2020-2021	% Change 2020-2021
P9010	Whole blood for transfusion	R	9510	9510	\$124.46	\$149.81	\$25.35	20%
P9011	Blood split unit	R	9520	9520	\$131.58	\$159.58	\$28.00	21%
P9012	Cryoprecipitate each unit	R	9511	9511	\$49.35	\$79.64	\$30.29	61%
P9016	Rbc leukocytes reduced	R	9512	9512	\$184.29	\$191.98	\$7.69	4%
P9017	Plasma 1 donor frz w/in 8 hr	R	9508	9508	\$81.94	\$83.78	\$1.84	2%
P9019	Platelets, each unit	R	9515	9515	\$105.71	\$71.83	-\$33.88	-32%
P9020	Platelet rich plasma unit	R	9516	9516	\$138.19	\$224.98	\$86.79	63%
P9021	Red blood cells unit	R	9517	9517	\$136.75	\$139.79	\$3.04	2%
P9022	Washed red blood cells unit	R	9518	9518	\$371.54	\$365.72	-\$5.82	-2%
P9023	Frozen plasma, pooled, sd	R	9509	9509	\$78.41	\$82.46	\$4.05	5%
P9031	Platelets leukocytes reduced	R	9526	9526	\$123.63	\$156.33	\$32.70	26%
P9032	Platelets, irradiated	R	9500	9500	\$136.64	\$143.02	\$6.38	5%
P9033	Platelets leukoreduced irradi	R	9521	9521	\$212.44	\$211.95	-\$0.49	0%
P9034	Platelets, pheresis	R	9507	9507	\$317.04	\$321.63	\$4.59	1%
P9035	Platelet pheres leukoreduced	R	9501	9501	\$488.84	\$496.75	\$7.91	2%
P9036	Platelet pheresis irradiated	R	9502	9502	\$677.45	\$612.09	-\$65.36	-10%
P9037	Plate pheres leukoredu irradi	R	9530	9530	\$621.01	\$625.64	\$4.63	1%
P9038	Rbc irradiated	R	9505	9505	\$186.71	\$169.29	-\$17.42	-9%
P9039	Rbc deglycerolized	R	9504	9504	\$313.54	\$446.88	\$133.34	43%
P9040	Rbc leukoreduced irradiated	R	9522	9522	\$257.10	\$263.05	\$5.95	2%
P9043	Plasma protein fract,5%,50ml	R	9514	9514	\$18.04	\$8.03	-\$10.01	-55%
P9044	Cryoprecipitatereducedplasma	R	9523	9523	\$89.44	\$66.82	-\$22.62	-25%
P9048	Plasmaprotein fract,5%,250ml	R	9519	9519	\$109.29	\$177.58	\$68.29	62%
P9050	Granulocytes, pheresis unit	E2	Not paid by Medicare when submitted on outpatient claims (any outpatient bill type).					
P9051	Blood, l/r, cmv-neg	R	9524	9524	\$184.05	\$223.15	\$39.10	21%
P9052	Platelets, hla-m, l/r, unit	R	9525	9525	\$835.99	\$818.20	-\$17.79	-2%
P9053	Plt, pher, l/r cmv-neg, irr	R	9531	9531	\$491.41	\$437.12	-\$54.29	-11%
P9054	Blood, l/r, froz/degly/wash	R	9527	9527	\$275.05	\$304.88	\$29.83	11%
P9055	Plt, aph/pher, l/r, cmv-neg	R	9528	9528	\$474.71	\$482.26	\$7.55	2%
P9056	Blood, l/r, irradiated	R	9529	9529	\$198.94	\$157.83	-\$41.11	-21%
P9057	Rbc, frz/deg/wsh, l/r, irradi	R	9532	9532	\$236.43	\$256.74	\$20.31	9%
P9058	Rbc, l/r, cmv-neg, irradi	R	9533	9533	\$241.48	\$244.78	\$3.30	1%
P9059	Plasma, frz between 8-24hour	R	9513	9513	\$74.27	\$73.35	-\$0.92	-1%
P9060	Fr frz plasma donor retested	R	9503	9503	\$48.91	\$65.40	\$16.49	34%



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Table 1. Blood and Blood Products								
P9070	Pathogen reduced plasma pool	R	9534	9534	\$31.60	\$60.21	\$28.61	91%
P9071	Pathogen reduced plasma sing	R	9535	9535	\$78.38	\$130.86	\$52.48	67%
P9073	Platelets pheresis path redu	R	9536	9536	\$598.81	\$591.25	-\$7.56	-1%
P9099	Blood component/product noc	N	New code in CY2020; comments will be accepted on the interim APC assignment for the new code. No additional payment, payment included in line items with APCs for incidental service					



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Table 2. Transfusion, Apheresis, and Stem Cell Procedures

HCPCS Code	Short Descriptor	2021 SI	2020 APC	2021 APC	Final 2020 Payment	Proposed CY 2021 Payment Rate	\$ Change 2020-2021	% Change 2020-2021
36430	Blood transfusion service	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
36440	Bl push transfuse 2 yr/<	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
36450	Bl exchange/transfuse nb	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
36455	Bl exchange/transfuse non-nb	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
36456	Prtl exchange transfuse nb	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
36460	Transfusion service fetal	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
36511	Apheresis wbc	S	5242	5242	\$1,323.47	\$1,383.31	\$59.84	5%
36512	Apheresis rbc	S	5242	5242	\$1,323.47	\$1,383.31	\$59.84	5%
36513	Apheresis platelets	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
36514	Apheresis plasma	S	5242	5242	\$1,323.47	\$1,383.31	\$59.84	5%
36516	Apheresis immunoads slctv	S	5243	5243	\$3,817.93	\$4,074.81	\$256.88	7%
36522	Photopheresis	S	5243	5243	\$3,817.93	\$4,074.81	\$256.88	7%
38205	Harvest allogeneic stem cell	B	Not paid under OPPS					
38206	Harvest auto stem cells	S	5242	5242	\$1,323.47	\$1,383.31	\$59.84	5%
38207	Cryopreserve stem cells	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38208	Thaw preserved stem cells	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38209	Wash harvest stem cells	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38210	T-cell depletion of harvest	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38211	Tumor cell deplete of harvest	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38212	Rbc depletion of harvest	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38213	Platelet deplete of harvest	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38214	Volume deplete of harvest	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38215	Harvest stem cell concentrate	S	5241	5241	\$388.00	\$401.73	\$13.73	4%
38220	Dx bone marrow aspirations	J1	5072	5072	\$1,372.45	\$1,428.38	\$55.93	4%
38221	Dx bone marrow biopsies	J1	5072	5072	\$1,372.45	\$1,428.38	\$55.93	4%
38222	Dx bone marrow bx & aspir	J1	5072	5073	\$2,318.63	\$2,379.14	\$60.51	3%
38230	Bone marrow harvest allogeneic	S	5242	5242	\$1,323.47	\$1,383.31	\$59.84	5%
38232	Bone marrow harvest autolog	S	5243	5243	\$3,817.93	\$4,074.81	\$256.88	7%
38240	Transplnt allo hct/donor	J1	5244	5244	\$37,431.71	\$37,470.54	\$38.83	0%
38241	Transplnt autol hct/donor	S	5242	5242	\$1,323.47	\$1,383.31	\$59.84	5%
38242	Transplnt allo lymphocytes	S	5242	5242	\$1,323.47	\$1,383.31	\$59.84	5%
38243	Transplj hematopoietic boost	S	5242	5242	\$1,323.47	\$1,383.31	\$59.84	5%
88184	Flowcytometry/ tc 1 marker	Q2	5673	5673	\$283.37	\$293.93	\$10.56	4%



Table 2. Transfusion, Apheresis, and Stem Cell Procedures

88185	Flowcytometry/tc add-on	N	Paid under OPPS; payment is packaged into payment for other services. Therefore, there is no separate APC payment.
88187	Flowcytometry/read 2-8	B	Not paid under OPPS.
88188	Flowcytometry/read 9-15	B	Not paid under OPPS.
88189	Flowcytometry/read 16 & >	B	Not paid under OPPS.



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Table 3. Transfusion Laboratory Services

HCPCS Code	Short Descriptor	2021 SI	2020 APC	2021 APC	Final 2020 Payment	Proposed CY 2021 Payment Rate	\$ Change 2020-2021	% Change 2020-2021
86850	Rbc antibody screen	Q1	5671	5671	\$49.46	\$50.85	\$1.39	3%
86860	Rbc antibody elution	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86870	Rbc antibody identification	Q2	5673	5673	\$283.37	\$293.93	\$10.56	4%
86880	Coombs test direct	Q1	5732	5733	\$33.43	\$56.50	\$23.07	69%
86885	Coombs test indirect qual	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86886	Coombs test indirect titer	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86890	Autologous blood process	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86891	Autologous blood op salvage	Q1	5674	5674	\$628.13	\$654.12	\$25.99	4%
86900	Blood typing serologic abo	Q1	5734	5734	\$109.02	\$113.23	\$4.21	4%
86901	Blood typing serologic rh(d)	Q1	5732	5732	\$33.43	\$34.42	\$0.99	3%
86902	Blood type antigen donor ea	Q1	5673	5673	\$283.37	\$293.93	\$10.56	4%
86904	Blood typing patient serum	Q1	5732	5732	\$33.43	\$34.42	\$0.99	3%
86905	Blood typing rbc antigens	Q1	5673	5673	\$283.37	\$293.93	\$10.56	4%
86906	Bld typing serologic rh phnt	Q1	5732	5732	\$33.43	\$34.42	\$0.99	3%
86920	Compatibility test spin	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86921	Compatibility test incubate	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86922	Compatibility test antiglob	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86923	Compatibility test electric	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86927	Plasma fresh frozen	S	5672	5672	\$143.48	\$152.07	\$8.59	6%
86930	Frozen blood prep	Q1	5673	5673	\$283.37	\$293.93	\$10.56	4%
86931	Frozen blood thaw	Q1	5673	5673	\$283.37	\$293.93	\$10.56	4%
86932	Frozen blood freeze/thaw	Q1	5732	5732	\$33.43	\$34.42	\$0.99	3%
86945	Blood product/irradiation	Q1	5732	5732	\$33.43	\$34.42	\$0.99	3%
86950	Leukocyte transfusion	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86960	Vol reduction of blood/prod	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86965	Pooling blood platelets	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86970	Rbc pretx incubatj w/chemical	Q1	5732	5732	\$33.43	\$34.42	\$0.99	3%
86971	Rbc pretx incubatj w/enzymes	Q1	5673	5673	\$283.37	\$293.93	\$10.56	4%
86972	Rbc pretx incubatj w/density	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86975	Rbc serum pretx incubj drugs	Q1	5734	5735	\$109.02	\$284.24	\$175.22	161%
86976	Rbc serum pretx id dilution	Q1	5731	5731	\$22.98	\$25.27	\$2.29	10%
86977	Rbc serum pretx incubj/inhib	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86978	Rbc pretreatment serum	Q1	5732	5732	\$33.43	\$34.42	\$0.99	3%



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Table 3. Transfusion Laboratory Services

86985	Split blood or products	Q1	5672	5672	\$143.48	\$152.07	\$8.59	6%
86999	Transfusion procedure	Q1	5731	5731	\$22.98	\$25.27	\$2.29	10%
P9100	Pathogen test for platelets	S	1494	5732	\$35.50	\$34.42	-\$1.08	-3%
Q2041	Axicabtagene ciloleucel car+	G	9035	9035	\$395,380.000	\$395,380.000	\$0.00	0%
Q2042	Tisagenlecleucel car-pos t	G	9194	9194	\$441,508.391	\$427,836.492	-\$13,671.90	-3%