DATE: December 7, 2011
TO: Medical Directors and Clinical Research Coordinators/Data Managers at centers participating in the 10-CMSMDS-1 study
FROM: J. Douglas Rizzo, MD, MS; Associate Scientific Director for Data Operations, CIBMTR
Stephanie Farnia, MPH; Director, Payor Policy, NMDP
Anne Dircks, BS, CCRP; Sr. Clinical Research Specialist, CIBMTR/NMDP
RE: Inappropriate claim denial in MDS Part I study for CMS CED

We have recently learned of a potential issue with billing CMS for HCT as part of the MDS Part I clinical study for CED. The purpose of this memo is to share that information with participating centers.

First, to facilitate accurate processing, please include the clinical trial number (NCT01166009) on all claim submissions. This number was noted as optional in the initial billing instructions but will assist in expediting reimbursement.

In situations where a patient has received HCT for the primary purpose of treating MDS and has a history of a prior clinical diagnosis that is specifically not covered by Medicare for allogeneic transplant, the billing claim may be automatically rejected due to an error in the Medicare Code Editor (MCE). The claim denial is based upon the systems recognition of the non-covered diagnosis, even if the primary diagnosis for HCT is MDS. At the national level, the only diagnosis that has a national non-coverage determination for allogeneic HCT is multiple myeloma (ICD-9 codes 203.00 and 203.01). We are not aware of any additional local coverage determinations that have resulted in non-coverage, but please clarify your local restrictions with your administrative team.

We have brought this matter to the attention of our contact in the Office of Clinical Standards and Quality at Medicare. They have informed us that they are working to resolve the issue. They will be issuing an updated version of the billing instructions for the CED in the coming months. These billing instructions will be sent to the local carriers. CIBMTR will work to make you aware of any instructions that individual centers should follow if revisions to the medical claim process are recommended by CMS.

CMS has asked that transplant centers notify CIBMTR as individual cases arise until the forthcoming bulletin has been published. Please contact Anne Dircks at adircks@nmdp.org or 612-884-8209 if your center believes it may have experienced a claim denial of this nature. Please continue to code the disease history of individual patients accurately and completely.