



Monday, April 11, 2011

Dear Valued Customer,

With respect to HCPCS questions, JHP is providing the following links to and excerpts from the CMS website as of March 2011, located at <http://www.cms.gov>.

2011 ASP-NDC-HCPCS Crosswalk : http://www.cms.gov/McrPartBDrugAvgSalesPrice/01a18_2011ASPFiles.asp#TopOfPage

Below is an excerpt of codes from the CMS website associated with JHP's brands:

2011 CODE	SHORT DESCRIPTOR	NDC	DRUG NAME	HCPCS DOSAGE	PKG SIZE	PKG QTY	BILL UNITS	BILL UNITS PKG
J0171	Adrenalin epinephrine inject	42023-0122-25	Epinephrine Hcl	0.1 MG	1	25	10	250
J0171	Adrenalin epinephrine inject	42023-0101-01	Adrenalin	0.1 MG	1	30	10	300
J0770	Colistimethate sodium inj	42023-0107-01	Colistimethate Sodium	UP TO 150 MG	1	1	1	1
J1380	Estradiol valerate 10 MG inj	42023-0110-01	Delestrogen	10 MG	5	1	5	5
J1380	Estradiol valerate 10 MG inj	42023-0111-01	Delestrogen	10 MG	5	1	10	10
J1380	Estradiol valerate 10 MG inj	42023-0112-01	Delestrogen	10 MG	5	1	20	20
J1380	Estradiol valerate 10 MG inj	42023-0112-01	Delestrogen	10 MG	5	1	20	20
J2590	Oxytocin injection	42023-0116-25	Oxytocin	10 UNITS	1	25	1	25
J2590	Oxytocin injection	42023-0116-01	Oxytocin	10 UNITS	10	1	10	10
J3030	Sumatriptan succinate / 6 MG	42023-0121-05	SUMATRIPTAN SUCCINATE	6 MG	0.5	5	1	5
J3250	Trimethobenzamide hcl inj	42023-0119-25	Tigan	200 MG	2	25	1	25
J3250	Trimethobenzamide hcl inj	42023-0118-01	Tigan	200 MG	20	1	10	10

Regarding billing, the following language can be found in the Medicare claims processing manual, 100-04, Chapter 17, Section 70:

Where HCPCS is required, units are entered in multiples of the units shown in the HCPCS narrative description. For example, if the description for the code is 50 mg, and 200 mg are provided, units are shown as 4;

Additional information and examples can be found in Section 70 at:

<http://www.cms.gov/manuals/downloads/clm104c17.pdf>.

“Selection of appropriate codes is the sole responsibility of the provider. As coding, coverage, and reimbursement rules can vary by payer and geographic area, providers always should consult with local payers on specific policies.”

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The following is a link to CMS regarding HCPCS coding questions.

http://www.cms.gov/MedHCPCSGenInfo/20_HCPCS_Coding_Questions.asp#TopOfPage

Below is an excerpt that relates to our products and is another resource for coding questions.

Issues regarding Level II HCPCS used in billing under the Hospital Outpatient Prospective Payment System (OPPS): The American Hospital Association (AHA) and the Centers for Medicare & Medicaid Services (CMS) have joined together in establishing the AHA clearinghouse to handle coding questions on established HCPCS usage. The American Health Information Management (AHIMA) also provides input through the Editorial Advisory Board.

The clearinghouse will serve as a centralized point of contact to educate hospitals, policy makers and the public on HCPCS coding. Hospitals and health care professionals have experienced a growing need for greater consistency and improved understanding of HCPCS coding in the wake of implementation of prospective payment methods that utilize HCPCS coding for billing and payment purposes.

The AHA's Central Office will handle the clearinghouse functions and provide open access to any person or organization that has questions regarding a subset of HCPCS coding, particularly hospitals and other health professionals who bill under the hospital outpatient prospective payment system (OPPS).

HCPCS-related questions must be submitted in the approved form, which you can download from the AHA website listed below, and either faxed or mailed directly to the AHA Central Office.

http://www.cms.gov/MedHCPCSGenInfo/Downloads/Request_HCPCS_Coding_Advice.pdf

Central Office on HCPCS
American Hospital Association
One North Franklin
Chicago, IL 60606
Fax: 312-422-4583

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