

CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS)

Advisory Panel on Hospital Outpatient Payment

March 9, 2015

Recommendations

PACKAGING ISSUES

- The Panel recommends that CMS continue to pay separately for the services covered by drug administration add-on codes.
- The Panel requests that CMS provide utilization data on newly packaged services to the Data Subcommittee for review at its next meeting.

APC PLACEMENTS

- The Panel recommends that CMS move HCPCS code 44384, *Ileoscopy, through stoma; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)*, HCPCS code 44402, *Colonoscopy through stoma; with endoscopic stent placement (including pre- and post-dilation and guide wire passage, when performed)*, HCPCS code 45347, *Sigmoidoscopy, flexible; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)*, and HCPCS code 45389, *Colonoscopy, flexible; with endoscopic stent placement (includes pre- and post-dilation and guide wire passage, when performed)*, to C-APC 0384, *GI Procedures with Stents*.

DATA ISSUES

- The Data Subcommittee recommends that CMS provide the Panel with a list of Ambulatory Payment Classifications (APCs) fluctuating significantly in costs.
- The Panel recommends that the work of the Data Subcommittee continue.

APC GROUPS AND STATUS INDICATOR (SI) ASSIGNMENT ISSUES

- The Panel recommends that the work of the APC Groups and SI Assignments Subcommittee continue.
- The Panel recommends that Jacqueline Phillips continue to serve as Chair of the APC Groups and SI Assignments Subcommittee.

VISITS AND OBSERVATIONS ISSUES

- The Panel recommends that CMS continue to report clinic and emergency department visits and observations claims data and bring any identified changes in utilization or cost patterns before the Visits and Observations Subcommittee.
- The Panel recommends that the work of the Visits and Observations Subcommittee continue.