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Lilly Oncology

Reimbursement Update

Previous Reimbursement Updates can be found at www.LillyPatientOne.com

Lilly Oncology is pleased to offer this newsletter as part of our commitment to patient access to care. For more information about the topics discussed in this issue, please contact Rick Ford, Director of Reimbursement Consulting for AccessMED, at 913-744-6001.

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This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of the written law or regulations or local payer guidelines. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

CMS Provides E-Prescribing Incentive Resources

Physician practices that may be eligible for the 2009 Medicare E-Prescribing Incentive Program will find an expanding source of information provided by the Centers for Medicare and Medicaid Services (CMS) on the agency's Web site at www.cms.hhs.gov/ERxIncentive.

In addition to the statutes and regulations that created the incentive program, CMS offers a number of educational resources and tips for successful participation in calendar year 2009.

Practices that answer "Yes" to the following three questions may be eligible to participate in the program:

1. Do you have an e-prescribing system/program and are you **routinely** using it?
2. Is your system capable of doing the functions of a qualified system?¹
3. Do you expect your Medicare Part B fee-for-service (FFS) charges for the codes in the table below to make up at least 10% of your total Medicare Part B FFS allowed charges for 2009?

If so, the practice may be eligible for the incentive payment and should report the e-prescribing measure.

¹ The functions of a qualified system can be found at <http://www.cms.hhs.gov/ERxIncentive/Downloads/erxincntivemadesimpleprogram040109.pdf>. (See Table 1.)

E-Prescribing Resources – continued from page 1

A practice that is eligible to participate becomes eligible for the incentive payment if an *e-prescribing code* is included on at least 50% of the claims

submitted with the covered procedure codes during calendar year 2009. The e-prescribing codes are:

Table 1: E-Prescribing Codes

G8443:	All prescriptions created during the encounter were generated using a qualified e-prescribing system
G8446:	Provider does have access to a qualified e-prescribing system. Some or all prescriptions generated during the encounter were printed or phoned in as required by state or federal law or regulations, patient request, or pharmacy system being unable to receive electronic transmission; OR because they were for narcotics or other controlled substances
G8445:	No prescriptions were generated during the encounter. Provider does have access to a qualified e-prescribing system

The appropriate e-prescribing code must be reported:

- on the same claim as the CPT code for a covered service (from Table 1)
- for the same patient
- for the same date of service
- by the same provider who performed the covered service.

It is important for participating practices to submit the e-prescribing code on the initial claim for the covered service – claims may not be resubmitted for the sole purpose of adding or correcting an e-prescribing code.

Claims with dates of service between January 1 and December 31, 2009 will be considered when CMS

conducts the incentive payment eligibility analysis, as long as the appropriate Medicare Administrative Contractor receives the claims by February 28, 2010.

Incentive payments for successful 2009 participants are expected to be distributed by CMS in mid-2010. For the 2009 incentive, “successful electronic prescribers” will be eligible for a payment equal to two percent of the eligible professional’s allowed charges under the Medicare Physician Fee Schedule

Other information recently added at www.cms.hhs.gov/ERxIncentive that participating practices may find useful includes “Claims-Based Reporting Principles for E-Prescribing Incentive Program” and “E-Prescribing Incentive Made Simple Fact Sheet.” ♦