

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11318	Date: March 29, 2022
	Change Request 12685

SUBJECT: July 2022 Quarterly Average Sales Price [ASP] Medicare Part B Drug Pricing Files and Revisions to Prior Quarterly Pricing Files

I. SUMMARY OF CHANGES: The ASP methodology is based on quarterly data submitted to CMS by manufacturers. CMS will supply the contractors with the ASP and Not Otherwise Classified (NOC) drug pricing files for Medicare Part B drugs on a quarterly basis. Payment allowance limits under the OPPTS are incorporated into the Outpatient Code Editor (OCE) through separate instructions that can be located in chapter 4, section 50 of the Internet Only Manual.

EFFECTIVE DATE: July 1, 2022

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: July 5, 2022

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revise information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	N/A

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Recurring Update Notification

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared- System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
12685.1.1	The contractors shall download the July 2022 ASP drug pricing file through the CDC on or after June 15, 2022.	X	X	X	X						
12685.1.1 .1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY22.JUL.I.V0615		X		X						
12685.1.1 .2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY22.JUL.I.V0615.FISS	X		X							
12685.1.1 .3	The contractors shall retrieve the July 2022 ASP NOC pricing file from the CMS ASP webpage on or after June 15, 2022.	X	X	X	X						
12685.1.1 .4	The contractors shall use the July 2022 ASP and NOC drug pricing files to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service July 1, 2022, through September 30, 2022.	X	X	X	X						
12685.1.1 .5	The contractors shall use the July 2022 ASP drug pricing file to update the drug payment limits for claims for infusion drugs furnished through a covered item of Durable Medical Equipment (DME) processed or reprocessed on or after July 1, 2022, with dates of service on or after July 1, 2022.		X		X						
12685.1.2	If released by CMS, the contractors shall download the revised April 2022 ASP drug pricing file through the CDC on or after June 15, 2022.	X	X	X	X						VDC
12685.1.2 .1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY22.APR.I.V0615		X		X						
12685.1.2 .2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY22.APR.I.V0615.FISS	X		X							
12685.1.2 .3	If released by CMS, the contractors shall overlay or manually update the previous April 2022 file with the new April 2022 ASP drug pricing file.	X	X	X	X						
12685.1.2 .4	If released by CMS, the contractors shall use the revised April 2022 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service April 1, 2022,	X	X	X	X						

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared- System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
	through June 30, 2022.										
12685.1.2 .5	If released by CMS, the contractors shall retrieve the revised April 2022 ASP NOC pricing file from the CMS ASP webpage on or after June 15, 2022.	X	X	X	X						
12685.1.2 .6	If released by CMS, the contractors shall use the revised April 2022 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service April 1, 2022, through June 30, 2022.	X	X	X	X						
12685.1.3	If released by CMS, the contractors shall download the revised January 2022 ASP drug pricing file through the CDC on or after June 15, 2022.	X	X	X	X						VDC
12685.1.3 .1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY22.JAN.I.V0615		X		X						
12685.1.3 .2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY22.JAN.I.V0615.FISS	X		X							
12685.1.3 .3	If released by CMS, the contractors shall overlay or manually update the previous January 2022 file with the new January 2022 ASP drug pricing file.	X	X	X	X						
12685.1.3 .4	If released by CMS, the contractors shall use the revised January 2022 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service January 1, 2022, through March 31, 2022.	X	X	X	X						
12685.1.3 .5	If released by CMS, the contractors shall retrieve the revised January 2022 ASP NOC pricing file from the CMS ASP webpage on or after June 15, 2022.	X	X	X	X						
12685.1.3 .6	If released by CMS, the contractors shall use the revised January 2022 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service January 1, 2022, through March 31, 2022.	X	X	X	X						
12685.1.4	If released by CMS, the contractors shall download the revised October 2021 ASP drug pricing file	X	X	X	X						VDC

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared- System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
	through the CDC on or after June 15, 2022.										
12685.1.4 .1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY21.OCT.I.V0615		X		X						
12685.1.4 .2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY21.OCT.I.V0615.FISS	X		X							
12685.1.4 .3	If released by CMS, the contractors shall overlay or manually update the previous October 2021 file with the new October 2021 ASP drug pricing file.	X	X	X	X						
12685.1.4 .4	If released by CMS, the contractors shall use the revised October 2021 ASP drug pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service October 1, 2021, through December 31, 2021.	X	X	X	X						
12685.1.4 .5	If released by CMS, the contractors shall retrieve the revised October 2021 ASP NOC pricing file from the CMS ASP webpage on or after June 15, 2022.	X	X	X	X						
12685.1.4 .6	If released by CMS, the contractors shall use the revised October 2021 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service October 1, 2021, through December 31, 2021.	X	X	X	X						
12685.1.5	If released by CMS, the contractors shall download the revised July 2021 ASP drug pricing file through the CDC on or after June 15, 2022.	X	X	X	X						VDC
12685.1.5 .1	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY21.JUL.I.V0615		X		X						
12685.1.5 .2	The contractors shall retrieve Final File: MU00.@BF12390.ASP.R2.CY21.JUL.I.V0615.FISS	X		X							
12685.1.5 .3	If released by CMS, the contractors shall overlay or manually update the previous July 2021 file with the new July 2021 ASP drug pricing file.	X	X	X	X						
12685.1.5 .4	If released by CMS, the contractors shall use the revised July 2021 ASP drug pricing file to determine the payment limit for claims for separately payable	X	X	X	X						

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared- System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
	Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service July 1, 2021, through September 30, 2021.										
12685.1.5.5	If released by CMS, the contractors shall retrieve the revised July 2021 ASP NOC pricing file from the CMS ASP webpage on or after June 15, 2022.	X	X	X	X						
12685.1.5.6	If released by CMS, the contractors shall use the revised July 2021 ASP NOC pricing file to determine the payment limit for claims for separately payable Medicare Part B drugs processed or reprocessed on or after July 1, 2022 with dates of service July 1, 2021, through September 30, 2021.	X	X	X	X						
12685.2	The contractors shall not search and adjust claims that have already been processed unless brought to their attention.	X	X	X	X						
12685.3	The contractors shall notify CMS of successful receipt via email to price_file_receipt@cms.hhs.gov stating the name of the file received, (e.g., Clinical Laboratory Fee Schedule (CLAB), ASP, etc.) and the entity for which it was received (i.e., include states, carrier numbers, quarter, and if Part A, Part B, or both).	X	X	X	X						
12685.4	The ASP and NOC drug pricing files will contain the applicable payment allowance limits (i.e., 106% ASP, 106% Wholesale Acquisition Cost (WAC), or 95% Average Wholesale Price (AWP)); therefore, Medicare contractors shall not make any additional payment calculations.	X	X	X	X						
12685.5	For any drug or biological not listed in the ASP or NOC drug pricing files, the contractors shall determine the payment allowance limits in accordance with the policy described in the Medicare Claims Processing Manual, chapter 17, section 20.1.3.	X	X	X	X						
12685.5.1	For any drug or biological not listed in the ASP or NOC drug pricing files that is billed with the KD modifier, the contractors shall determine the payment allowance limits in accordance with instructions for pricing and payment changes for infusion drugs furnished through an item of durable medical equipment on or after January 1, 2017, associated with	X	X	X	X						

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared- System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
	the passage of the 21st Century Cures Act.										
12685.6	The contractors shall use the most current version available of the Medicare Contractor Reporting Template for Part B drugs to report information on Medicare Part B drugs not paid on a cost or prospective payment basis when payment limits are not listed in the quarterly drug pricing ASP and NOC files, or in the OPSS Pricer.	X	X	X	X						
12685.6.1	The contractors shall use the template to report pricing information for: <ul style="list-style-type: none"> NOC drugs not included on the Medicare Part B NOC pricing file any Healthcare Common Procedure Coding System (HCPCS) drug codes not on the ASP file, and OPSS drugs not in the OPSS Pricer. 	X	X	X	X						
12685.6.2	The contractors shall list all drugs that were priced since the last submitted report.	X	X	X	X						
12685.6.3	The contractors shall list each drug priced on the report only once.	X	X	X	X						
12685.6.4	For compounded drugs, the contractors shall report the name of each drug in the compounded product.	X	X	X	X						
12685.6.5	The contractors shall prepare and submit the reports so that each report covers approximately 30 days of pricing activity.	X	X		X						
12685.6.6	The contractors shall report drugs omitted from previous reports in the next report.	X	X	X	X						
12685.6.7	The contractors shall complete the report in its entirety.	X	X	X	X						
12685.6.8	The contractors shall not report radiopharmaceuticals.		X								
12685.6.9	The contractors shall report pricing information for drugs, biologicals, and radiopharmaceuticals that are billed using C9399.	X		X							

Number	Requirement	Responsibility									
		A/B MAC			D M E	Shared-System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
12685.6.10	The contractors shall download the most current version available of the template from the CMS website at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice .	X	X	X	X						
12685.6.11	The contractors shall complete the template on a monthly basis.	X	X	X	X						
12685.6.12	The contractors shall ensure that the format of the template is Microsoft Excel.	X	X	X	X						
12685.6.13	The contractors shall send the completed template to sec303aspdata@cms.hhs.gov on the first business day of the month.	X	X	X	X						
12685.6.14	If the contractor has not priced any drugs since the last submitted report, in lieu of using the template, the contractor shall send an email to Sec303aspdata@cms.hhs.gov stating that the contractor has no drug pricing to report.	X	X	X	X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility						
		A/B MAC			D M E	C E D I		
		A	B	H H H			M A C	
12685.7	Medicare Learning Network® (MLN): CMS will market provider education content through the MLN Connects® newsletter shortly after CMS releases the CR. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 instructions for distributing the MLN Connects newsletter information to providers and link to relevant information on your website. You may supplement MLN content with your local information after we release the MLN Connects newsletter. Subscribe to the “MLN Connects” listserv to get MLN content notifications. You don’t need to separately track and report MLN content releases when you distribute MLN Connects newsletter content per the manual section referenced above.	X	X	X	X			

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Felicia Brown, 410-786-9287 or felicia.brown@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 0