



American Society for
Transplantation and Cellular Therapy

Executive Summary

ASTCT appreciates the opportunity to provide comments to CMS regarding the FY 2023 IPPS Proposed Rule. We address the following points in more detail throughout the remainder of the letter.

1) MS-DRG 018 - Chimeric Antigen Receptor (CAR) T-cell and Other Immunotherapies:

- ASTCT appreciates and supports CMS' proposal to continue the unique payment and rate-setting methodologies currently in place for MS-DRG 018.
- ASTCT is encouraged by CMS' ongoing consideration of additional engagement mechanisms with stakeholders in the cell and gene therapy space and encourages CMS to utilize public discussion forums, such as Town Halls and listening sessions.
- ASTCT requests that CMS identify a mechanism for public discussion of those procedure codes originating from the annual March ICD-10-PCS meetings that are proposed for mapping to MS-DRG 018 each October 1, and that CMS provide a working definition for "other immunotherapies" that stakeholders can reference.
- ASTCT disagrees with the 087x series being mapped to the drug cost group and also requests that CMS provide a detailed order of operations for how it calculates the relative weight for MS-DRG 018.
- ASTCT provides additional technical suggestions in an appendix at the end of this letter.

2) MS-DRG 014 – Allogeneic Bone Marrow (Stem Cell) Transplantation

- ASTCT urgently requests that CMS release updated cost reporting instructions associated with Section 108, which provides for reimbursement of donor cell and acquisition costs on a reasonable cost basis.
- ASTCT suggests that CMS modify the cost group mapping for the administration of stem cells and also update the accompanying manual instructions.

3) Requests for Information:

- ASTCT requests that CMS begin a study of potentially utilizing Medicare Advantage shadow claims for purposes of increasing the volume of claims available for rare diseases, conditions and procedures, as well as potentially incorporating the data for purposes of rate-setting.
- ASTCT supports CMS' goal of incorporating the social determinants of health and will share with CMS the findings from an upcoming society meeting devoted to this topic.

4) General IPPS Commentary:

- ASTCT supports CMS' proposed methodology for calculating FY 2023 relative weights, but is concerned with the significant increase in the outlier fixed loss threshold.
- ASTCT suggests that CMS should delay implementation of utilizing National Drug Codes for NTAP payment purposes until a technical advisory group can provide insight on multiple issues of concern.
- ASTCT requests that CMS publish an example calculation of when two or more NTAP therapies are utilized within a single inpatient stay.
- ASTCT requests that CMS consider the financial incentives that the significant cost determination process has on Medicare Advantage plans requesting National Coverage Analyses for new and high-cost therapies, as well as the burden this linkage will create for clinician, hospital and beneficiary stakeholders as more cell and gene therapies are approved.