

Coding Options for Administration of Autologous CAR-T Updated as of October 5, 2020

Autologous CAR-T Product Reporting Options ^A	Inpatient Claim - Facility Reporting					Outpatient Claim - Facility Reporting				
	Revenue Code*	Notes ^{AA}	HCPCS Code**	HCPCS Product Code Description	Payment Implications	Revenue Code*	Notes	HCPCS Code	HCPCS Product Code Description	Payment Implications
PRODUCT REPORTING TO MEDICARE	0891 - Special Processed Drugs - FDA Approved Cell Therapy	The charge for the product/drug is typically reported without a HCPCS code on inpatient claims.	Q2041	Axicabtagene ciloleucel, up to 200 million autologous anti cd19 car positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	MS-DRG 018 for CAR-T is now inclusive of product costs since there is no NTAP in place for any of the approved CAR-T products as of Oct 1, 2020. Product charges are used to determine outlier payments and used in future rate-setting.	0891 - Special Processed Drugs - FDA Approved Cell Therapy	Report appropriate HCPCS code for the product	Q2041	Axicabtagene ciloleucel, up to 200 million autologous anti cd19 car positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	HCPCS product code generates ASP + 6% reimbursement
			Q2042	Tisagenlecleucel, up to 600 million car-positive viable t cells, and dose preparation procedures, per therapeutic dose				Q2042	Tisagenlecleucel, up to 600 million car-positive viable t cells, and dose preparation procedures, per therapeutic dose	
			C9399 and the product NDC Code until a HCPCS code is released	Brexucabtagene Autoleucel				C9399 and the product NDC until a HCPCS code is released	Brexucabtagene Autoleucel	
PRODUCT REPORTING TO MEDICAID***	0891 - Special Processed Drugs - FDA Approved Cell Therapy	The charge for the product/drug is typically reported without a HCPCS code on inpatient claims.	Q2041	Axicabtagene ciloleucel, up to 200 million autologous anti cd19 car positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	Depends on the Medicaid Program	0891 - Special Processed Drugs - FDA Approved Cell Therapy	Report appropriate HCPCS code for the product	Q2041	Axicabtagene ciloleucel, up to 200 million autologous anti cd19 car positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	Depends on the Medicaid Program
			Q2042	Tisagenlecleucel, up to 600 million car-positive viable t cells, and dose preparation procedures, per therapeutic dose				Q2042	Tisagenlecleucel, up to 600 million car-positive viable t cells, and dose preparation procedures, per therapeutic dose	
			C9399 or J3590 and the product NDC Code until a HCPCS code is released; also check with your payer	Brexucabtagene Autoleucel				C9399 and the product NDC until a HCPCS code is released; also check with your payer	Brexucabtagene Autoleucel	
PRODUCT REPORTING TO COMMERCIAL PAYERS	0891 - Special Processed Drugs - FDA Approved Cell Therapy	The charge for the product/drug is typically reported without a HCPCS code on inpatient claims.	Q2041	Axicabtagene ciloleucel, up to 200 million autologous anti cd19 car positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	Depends on commercial contracts or out-of-network payment	0891 - Special Processed Drugs - FDA Approved Cell Therapy	Report appropriate HCPCS code for the product	Q2041	Axicabtagene ciloleucel, up to 200 million autologous anti cd19 car positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose	Depends on commercial contracts or out-of-network payment
			Q2042	Tisagenlecleucel, up to 600 million car-positive viable t cells, and dose preparation procedures, per therapeutic dose				Q2042	Tisagenlecleucel, up to 600 million car-positive viable t cells, and dose preparation procedures, per therapeutic dose	
			C9399 or J3590 and the product NDC Code until a HCPCS code is released; also check with your payer	Brexucabtagene Autoleucel				C9399 and the product NDC until a HCPCS code is released; also check with your payer	Brexucabtagene Autoleucel	

^A Medicare Special Edition article SE 19009 published May 28, 2019 updates information in the April 2019 OPPS Update Transmittal 4255 where CMS gives providers the option to include cell collection and cell processing charges with the product charge and report all under revenue code 0891. It can be found at <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE19009.pdf>. Value code 86 may be used to report product acquisition cost if requested or allowed by payers.

^{AA}In the FY 2021 IPPS Final Rule, CMS states that there is nothing to preclude hospitals from setting their product charge in accordance with their hospital's cost-to-charge ratio (CCR). Providers should review this and report an appropriate charge as this will impact future MS-DRG 018 rate-setting.

* Revenue code 0891 (an extension of pharmacy 025x or 063x) was created by the National Uniform Billing Committee (NUBC) for reporting special processed drugs - FDA approved cell therapy and includes CAR-T products; see the NUBC manual for more details:

<http://www.nubc.org/subscribersonly/PDFs/Cell%20Therapy%20Changes%20August%202018.pdf>; All providers and payers have to use the new codes per the HIPAA transaction code set regulation. Additionally, providers should review the instructions released by CMS in Transmittal R10360CP, effective Oct 5, 2020, to better understand how to report certain instances when a CAR-T product is not incurred (such as expanded access use) as well as when a CAR-T product cost is incurred but the patient is involved in a clinical trial of some other drug. This can be found at: <https://www.cms.gov/files/document/r10360cp.pdf>.

**HCPCS codes do not typically print on inpatient Medicare claims so the product Q-codes are not expected to appear on Medicare inpatient claims despite the codes being shown here unless Medicare instructs differently.

***Determine specifics of reporting requirements from your state's Medicaid program and the specific patient's Medicaid plan.

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