

June 7, 2013

ESRD New Payment Regulations

Effective January 1, 2013

The Department of Health and Social Services has adopted new End Stage Renal Disease coverage and payment regulations that became effective January 1, 2013. The new regulations, 7 AAC 140.700 – 7 AAC 140.720 and 7 AAC 145.607, impact payments for outpatient ESRD services and related drugs.

Dialysis payment rate

The composite per-treatment payment rates are changed to:

- \$1000 for hemodialysis
- \$500 for peritoneal dialysis

The current Revenue Codes covered by Alaska Medicaid for ESRD facilities and payment under the new regulations:

- 821 — Hemodialysis
- 831 — Peritoneal Dialysis
- 841 — Continuous Ambulatory Peritoneal Dialysis (CAPD)
- 851 — Peritoneal Dialysis

Only one dialysis revenue code is payable per day per client per provider.

Separate Payment for Drugs

The new dialysis payment rates are all-inclusive except that the department will pay separately for the following erythrocyte-stimulating agents and parenteral iron replacement products:

HCPCS CODE	DRUG DESCRIPTION
J0882	darbepoetin alfa
J0886	epoetin alfa
J0890	peginesatide
J1750	iron dextran
J1756	iron sucrose
J2916	sodium ferric gluconate complex in sucrose injection
Q0139	ferumoxytol
Q4081	epoetin alfa

Additional billing instructions will be released soon. *Questions?* Please contact Provider Inquiry at 907.644.6800, option 1, or 800.770.5650, option 1, 1.