

March 2021

Information You Need

Exclusive for AAPC Book & Codify by AAPC Purchasers

Reporting Eli Lilly's Antibody Combo Therapy

Our arsenal of treatment options for [COVID-19](#) expands once again. On Feb. 18, the Centers for Medicare & Medicaid Services (CMS) released two new HCPCS Level II codes for Eli Lilly's antibody cocktail. This comes after the U.S. Food and Drug Administration (FDA) granted Emergency Use Authorization (EUA) for investigational bamlanivimab and etesevimab as a combination therapy for COVID-19. [Learn More »](#)

CMS Waives Part B Cost Sharing for More Services

During the public health emergency (PHE) for [COVID-19](#), patients' Medicare Part B cost sharing (coinsurance and deductible) is waived for certain healthcare services. The Centers for Medicare & Medicaid Services (CMS) maintains a list of codes to which the cost-sharing waiver applies, and the list just got a little longer. CMS has added three CPT® and three HCPCS Level II codes to the list of services applicable for the cost-sharing waiver. [Learn More »](#)

Get a Peek at Future ICD-10 Codes

An ICD-10 Coordination and Maintenance Committee virtual meeting is scheduled for March 9–10, from 9 a.m. to 5 p.m. The Centers for Medicare & Medicaid Services (CMS) and the Centers for Disease Control and Prevention National Center for Health Statistics (CDC NCHS) have posted tentative agendas on their websites. [Learn More »](#)

Got 3-Day Rule Blues?

A Dec. 3, 2020, MLN Matters® article reaffirms appropriate billing procedures and compliance associated with the three-day window. The article was prompted by the Office of Inspector General (OIG) May 2020 report *Medicare Made \$11.7 Million in Overpayments for Nonphysician Outpatient Services Provided Shortly Before or During Inpatient Stays*, which showed that Medicare made \$11.7 million in incorrect payments to hospital outpatient providers during 2016 and 2017. [Learn More »](#)

How-To Modifier 22

When a procedure exceeds the normal range of complexity, [modifier 22](#) Increased procedural services may come into play. But difficulty alone doesn't justify appending modifier 22 to the procedure code. Only rare, outlying cases — when a physician has gone above and beyond the typical framework of a particular procedure — call for modifier 22. [Learn More »](#)



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