# Administrative Bulletin 24-28

**101 CMR 322.00: *Rates for*** ***Durable Medical Equipment, Oxygen and Respiratory Therapy Equipment***

Effective April 1, and July 1, 2024

**Coding Updates for Durable Medical Equipment, Oxygen and Respiratory Therapy Equipment**

## Summary

In accordance with 101 CMR 322.01(6): *Coding Updates and Corrections,* the Executive Office of Health and Human Services (EOHHS) is adding new procedure codes, deleting outdated codes, and updating certain rates, effective for dates of service on or after April 1, 2024, and July 1, 2024.

[AB 24-17](https://www.mass.gov/lists/eohhs-administrative-bulletins#2024-eohhs-administrative-bulletins-), effective April 1, 2024, listed quarterly coding updates, including the then new code E2298 and its applicable modifiers. The Centers for Medicare & Medicaid Services recently issued revised rates for these codes, effective April 1, 2024. Rates for these codes are determined by the methodology for capped rental items in 101 CMR 322.03(18).

For new codes with associated Medicare fees, payment rates are set at a percentage of Medicare fees as described in 101 CMR 322.03(16)(a). For new codes without associated Medicare fees, individual consideration (I.C.) is applied to establish payment as described in 101 CMR 322.03(16)(b). Rates listed in this administrative bulletin apply until revised rates are issued by EOHHS.

The following lists specify codes that have been added, deleted, or have revised rates.

The appearance of a code in the tables below does not constitute authorization for, or approval of, the procedures or services for which rates are determined under 101 CMR 322.00. Governmental units that purchase care are responsible for the definition, authorization, and approval of care to publicly aided individuals.

### Effective April 1, 2024

### Revised Rates

| **Code** | **Rate** |
| --- | --- |
| E2298NU | $2,013.90  |
| E2298UE | $1,510.43  |
| E2298KH | $201.39  |
| E2298KI | $201.39  |
| E2298KJ | $151.04  |

### Effective July 1, 2024

## Added Codes

| **Code** | **Description** | **Rate** |
| --- | --- | --- |
| J0211 | Injection, sodium nitrite 3 mg and sodium thiosulfate 125 mg (nithiodote) |  I.C.  |
| J0687 | Injection, cefazolin sodium (wg critical care), not therapeutically equivalent to j0690, 500 mg |  $0.92  |
| J0872 | Injection, daptomycin (xellia), unrefrigerated, not therapeutically equivalent to j0878 or j0873, 1 mg |  $0.28  |
| J1597 | Injection, glycopyrrolate (glyrx-pf), 0.1 mg |  I.C.  |
| J1598 | Injection, glycopyrrolate (fresenius kabi), not therapeutically equivalent to j1596, 0.1 mg |  I.C.  |
| J1748 | Injection, infliximab-dyyb (zymfentra), 10 mg |  I.C.  |
| J2183 | Injection, meropenem (wg critical care), not therapeutically equivalent to j2185, 100 mg |  $1.36  |
| J2246 | Injection, micafungin in sodium (baxter), not therapeutically equivalent to j2248, 1 mg |  I.C.  |
| J2267 | Injection, mirikizumab-mrkz, 1 mg |  $29.53  |
| J2373 | Injection, phenylephrine hydrochloride (immphentiv), 20 micrograms |  $0.18  |
| J2468 | Injection, palonosetron hydrochloride (avyxa), not therapeutically equivalent to j2469, 25 micrograms |  I.C.  |
| J2470 | Injection, pantoprazole sodium, 40 mg |  I.C.  |
| J2471 | Injection, pantoprazole (hikma), not therapeutically equivalent to j2470, 40 mg |  I.C.  |
| J3247 | Injection, secukinumab, intravenous, 1 mg |  $14.93  |
| J3263 | Injection, toripalimab-tpzi, 1 mg |  $33.38  |
| J3393 | Injection, betibeglogene autotemcel, per treatment |  I.C.  |
| J3394 | Injection, lovotibeglogene autotemcel, per treatment |  I.C.  |
| J8611 | Methotrexate (jylamvo), oral, 2.5 mg |  I.C.  |
| J8612 | Methotrexate (xatmep), oral, 2.5 mg |  I.C.  |
| J9361 | Injection, efbemalenograstim alfa-vuxw, 0.5 mg |  I.C.  |
| Q5137 | Injection, ustekinumab-auub (wezlana), biosimilar, subcutaneous, 1 mg |  I.C.  |
| Q5138 | Injection, ustekinumab-auub (wezlana), biosimilar, intravenous, 1 m |  I.C.  |
| J0134 | Injection, acetaminophen (fresenius kabi), not therapeutically equivalent to j0131, 10 mg |  $0.04  |
| J0136 | Injection, acetaminophen (b braun), not therapeutically equivalent to j0131, 10 mg |  $0.04  |
| J0137 | Injection, acetaminophen (hikma), not therapeutically equivalent to j0131, 10 mg |  $0.05  |
| J0173 | Injection, epinephrine (belcher), not therapeutically equivalent to j0171, 0.1 mg |  $1.58  |
| J0401 | Injection, aripiprazole (abilify maintena), 1 mg |  $5.95  |
| J0651 | Injection, levothyroxine sodium (fresenius kabi), not therapeutically equivalent to j0650, 10 mcg |  I.C.  |
| J0652 | Injection, levothyroxine sodium (hikma), not therapeutically equivalent to j0650, 10 mcg |  I.C.  |
| J0873 | Injection, daptomycin (xellia), not therapeutically equivalent to j0878 or j0872, 1 mg |  $0.03  |
| J0893 | Injection, decitabine (sun pharma), not therapeutically equivalent to j0894, 1 mg |  I.C.  |
| J1574 | Injection, ganciclovir sodium (exela), not therapeutically equivalent to j1570, 500 mg |  I.C.  |
| J1806 | Injection, esmolol hydrochloride (wg critical care), not therapeutically equivalent to j1805, 10 mg |  $0.34  |
| J1921 | Injection, labetalol hydrochloride (hikma), not therapeutically equivalent to j1920, 5 mg |  $1.81  |
| J2021 | Injection, linezolid (hospira), not therapeutically equivalent to j2020, 200 mg |  $12.19  |
| J2184 | Injection, meropenem (b braun), not therapeutically equivalent to j2185, 100 mg |  $1.79  |
| J2251 | Injection, midazolam hydrochloride (wg critical care), not therapeutically equivalent to j2250, per 1 mg |  $0.18  |
| J2272 | Injection, morphine sulfate (fresenius kabi), not therapeutically equivalent to j2270, up to 10 mg |  $3.87  |
| J2281 | Injection, moxifloxacin (fresenius kabi), not therapeutically equivalent to j2280, 100 mg |  $6.43  |
| J2599 | Injection, vasopressin (american regent), not therapeutically equivalent to j2598, 1 unit |  $1.34  |
| J2806 | Injection, sincalide (maia), not therapeutically equivalent to j2805, 5 micrograms |  I.C.  |
| J3244 | Injection, tigecycline (accord), not therapeutically equivalent to j3243, 1 mg |  I.C.  |
| J3371 | Injection, vancomycin hcl (mylan), not therapeutically equivalent to j3370, 500 mg |  $5.05  |
| J3372 | Injection, vancomycin hcl (xellia), not therapeutically equivalent to j3370, 500 mg |  $5.51  |
| J9046 | Injection, bortezomib (dr. reddy's), not therapeutically equivalent to j9041, 0.1 mg |  I.C.  |
| J9172 | Injection, docetaxel (ingenus), not therapeutically equivalent to j9171, 1 mg |  I.C.  |
| J9258 | Injection, paclitaxel protein-bound particles (teva), not therapeutically equivalent to j9264, 1 mg |  I.C.  |
| J9259 | Injection, paclitaxel protein-bound particles (american regent), not therapeutically equivalent to j9264, 1 mg |  $13.09  |
| J9294 | Injection, pemetrexed (hospira), not therapeutically equivalent to j9305, 10 mg |  $1.67  |
| J9296 | Injection, pemetrexed (accord), not therapeutically equivalent to j9305, 10 mg |  I.C.  |
| J9314 | Injection, pemetrexed (teva), not therapeutically equivalent to j9305, 10 mg |  $9.35  |
| J9322 | Injection, pemetrexed (blue point), not therapeutically equivalent to j9305, 10 mg |  I.C.  |
| J9393 | Injection, fulvestrant (teva), not therapeutically equivalent to j9395, 25 mg |  I.C.  |
| Q2055 | Idecabtagene vicleucel, up to 510 million autologous b-cell maturation antigen (bcma) directed car-positive t cells, including leukapheresis and dose preparation procedures, per therapeutic dose | $427,936.35  |

### Deleted Codes

| **Code** | **Description** |
| --- | --- |
| J2780 | Injection, Ranitidine Hydrochloride, 25 MG |
| J9371 | Injection, Vincristine Sulfate Liposome, 1 MG |