

New ESRD Payment Methodology & Billing Requirements

Attention ESRD Providers:

Effective for dates of service beginning September 1, 2023, Wyoming Medicaid will reimburse End Stage Renal Disease (ESRD) facilities at the lesser of:

1. Provider's billed charges for the service, or;
2. State-developed bundled per treatment rate

The Wyoming Medicaid State-developed per treatment payment rate will be determined annually by the Wyoming Department of Health Medicaid. The State-developed rate is the average Medicare projected per treatment amount, which is calculated by using data from the most recent Final ESRD Prospective Payment Systems (PPS) Facility Level Impact File, which contains calendar year payment projections. Wyoming Medicaid will use the Medicare ESRD PPS consolidated billing list for the specific calendar year. The State-developed rate for 2023 is \$300.82 per treatment.

State-Developed Bundled Per Treatment Rate

The ESRD State-developed rate provides a bundled, per treatment payment to ESRD facilities that includes all renal dialysis services furnished for outpatient maintenance dialysis, including drugs and other biological products that previously paid separately.

Wyoming Medicaid will use the Medicare ESRD PPS consolidated billing list for the specific calendar year. This list is **not** all inclusive and can be referenced at:

<https://www.cms.gov/files/document/items-and-services-subject-esrd-pps-consolidated-billing-effective-1-1-2023.pdf>

Billing Requirements For ESRD Services For Medicaid Only Claims with Dates of Service Beginning September 1, 2023

ESRD clinics will be required to bill an encounter code for each treatment performed per date of service. The encounter revenue codes are:

- 0821 – Hemodialysis/Composite or other rate HEMO/COMPOSITE
- 0831 – Peritoneal/Composite or other rate PERTNL/COMPOSITE
- 0841 – CAPD/Composite or other rate CAPD/COMPOSITE
- 0851 – CCPD/Composite or other rate CCPD/COMPOSITE

The encounter revenue code must be billed on the same line with a procedure code in the range of 90951 – 90970 or 90999.

- Any other procedure code in combination with the encounter revenue codes will cause claim denials, causing payment delays.

One encounter revenue code can be billed and will be paid at the PPS rate per date of service.

All other detail lines with drugs, laboratory services, supplies, and capital-related costs will pay \$0.00.

- NDC codes must be billed with all medications and J-codes.

Example Claim

Revenue code	Procedure code	Date of service beginning	Date of service end	Line paid amount
0821	90951	01/05/2023	01/05/2023	300.82
0270	A4657	01/05/2023	01/05/2023	0.00
0636	J0887	01/05/2023	01/05/2023	0.00
0821	90962	01/07/2023	01/07/2023	300.82
0250	J3490	01/07/2023	01/07/2023	0.00
0270	A4657	01/07/2023	01/07/2023	0.00
0636	J1270	01/07/2023	01/07/2023	0.00
Total of claim paid				\$601.64

ESRD Claim Submissions and Claims Adjustments with Dates of Service Prior to 9/1/23

Medicaid ESRD claims and claim adjustments with dates of service 1/1/2021 to 8/31/2023 will be reimbursed at 8.88% of billed charges.

Medicare claims will process with the lesser of logic.

For questions or concerns, contact Amy Guimond at amy.guimond@wyo.gov or 307-777-3427.

Deployment Information

Deployment Date: July 24, 2023

Audiences: End-Stage Renal Disease (ESRD) Treatment