

Hemospray Receives New Technology Add-on Payment (NTAP)

Hemospray Eligible for New Technology Add-on Payments (NTAP)

What is NTAP?

The Medicare New Technology Add-on Payment (NTAP) program used by the Centers for Medicare and Medicaid Services (CMS) was established to provide additional payment for new technologies/services in Medicare's hospital inpatient prospective payment system (IPPS). The intent of the additional payments is to provide a temporary payment mechanism for the use of new technologies in addition to the DRG payment amount the hospital would otherwise receive. The NTAPs are provided until CMS has an appropriate number of inpatient claims data for MS-DRG rate setting that reflected the added costs of the new technology.

To be eligible for NTAP, a technology must meet three criteria, including that a technology must be considered new, must add significant cost to a hospital stay, and show substantial clinical improvement over current standards of care. In the fiscal year (FY) 2021 final rule published by CMS, it was determined that Hemospray meets all three criteria.

When does the payment go into effect?

Hospitals will be eligible to receive NTAP for Hemospray beginning **October 1, 2020**, for a period of up to three years.

ICD-10 Codes

One of the following ICD-10 codes **MUST** be reported on the claim for a hospital to be eligible for NTAP.

***XW0G886** (Introduction of mineral-based topical hemostatic agent into upper GI, via natural or artificial opening endoscopic, new technology group 6)*

***XW0H886** (Introduction of mineral-based topical hemostatic agent into lower GI, via natural or artificial opening endoscopic, new technology group 6)*

Payment Calculation

Each case where the total costs of the case are more than the MS-DRG payment, CMS will provide an add-on payment.

As stated in the FY2021 Hospital Inpatient Prospective Payment Final Rule from CMS, *"Under § 412.88(a)(2), we limit new technology add-on payments to the lesser of 65 percent of the average cost of the technology, or 65 percent of the costs in excess of the MS-DRG payment for the case. As a result, the maximum new technology add-on payment for a case involving the use of Hemospray is \$1,625.00 for FY 2021."*

If you have further questions, please contact reimbursement@cookmedical.com



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