
Issue Brief

FEDERAL ISSUE BRIEF



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CMS Issuing Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems; Quality Reporting Programs; etc.; Correction Rule

The Centers for Medicare & Medicaid Services (CMS) are issuing a 20-page correction rule to the Final Calendar Year (CY) 2025 Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems.

This document corrects technical and typographical errors in the final rule with comment period that appeared in the November 27, 2024 **Federal Register** titled "Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center

Payment Systems; Quality Reporting Programs, including the Hospital Inpatient Quality Reporting Program; Health and Safety Standards for Obstetrical Services in Hospitals and Critical Access Hospitals; Prior Authorization; Requests for Information; Medicaid and CHIP

Continuous Eligibility; Medicaid Clinic Services Four Walls Exceptions; Individuals Currently or Formerly in Custody of Penal Authorities; Revision to Medicare Special Enrollment Period and All-Inclusive Rate Add-On Payment for High-Cost Drugs Provided by Indian Health Service and Tribal Facilities".

The document is currently available at: <https://public-inspection.federalregister.gov/2025-00081.pdf>. The rule is scheduled for publication on January 13. The changes are retroactive to January 1, 2025.

2. OPPS Addenda Summary of Errors

To view any corrections or updates to the final CY 2025 OPPS status indicators, APC assignments, relative weights, copayment rates, device-intensive status, and short descriptors in the OPPS addenda, CMS refers readers to the Addenda and supporting files that are posted on the CMS website at:

<https://www.cms.gov/medicare/payment/prospective-payment-systems/hospital-outpatient/regulations-notices>

Further, CMS says "Select "CMS-1809-F2" from the list of regulations. All corrected Addenda for this correcting document are contained in the zipped folder titled "2025 F2 OPPS Addenda" at the bottom of the CMS webpage for CMS-1809-F2.

Neither CMS or the Federal Register has posted the addenda.

Correction of Errors

The following is from CMS. While somewhat redundant to other sections of the rule it is helpful in getting to the corrections being made.

1. On page 94054, third column, last partial paragraph, lines 3 and 4, "CPT code 0899T" is corrected to read "CPT code 0889T".

2. On page 94055, third column, first partial paragraph, first line, "code 0899T" is corrected to read "code 0889T".

3. On page 94111, in the heading titled "54. Skin Cell Suspension Autograft (SCSA) Procedures, CPT Codes 15011 Through 15018 (APCs 5051, 5054, and 1567)", line 4, the figure "1567" is corrected to read "1532".

4. On page 94114, second column,

a. First partial paragraph,

(1) Lines 1 through 3, "APC 1567 (New Technology – Level 30 (\$6001-6500)) with a \$6,250.50 payment rate" is corrected to read "APC 1532 (New Technology – Level 32 (\$7001-7500)) with a \$7,250.50 payment rate".

(2) Lines 12 through 13, "APC 1567 with a payment rate of \$6,250.50" are corrected to read "APC 1532 with a payment rate of \$7,250.50".

b. First full paragraph, lines 12 through 13 "APC 1567 ((New Technology—Level 30 (\$6001-6500)))" is corrected to read "APC 1532 (New Technology—Level 32 (\$7001-7500))".

5. On page 94120, second column, second full paragraph, lines 4 through 9 that read “We note that we will replace HCPCS code C9734 with CPT code 5X008 (55882) effective January 1, 2025, as well as assign the underlying claims associated with C9734 to CPT code 5X008 (55882)” are corrected in their entirety to read, “We note that we will crosswalk claims for HCPCS code C9734 to CPT code 5X008 (55882) to determine the APC assignment for CPT code 5X008 (55882) for CY 2025. HCPCS C9734 will continue to be assigned to APC 5115 (Level 5 Musculoskeletal Procedures) in CY 2025.”

6. On page 94368, first column, second footnoted paragraph (footnote 270), lines 4 through 6, the link “https://www.cms.gov/About-CMS/Agency-Information/OMH/OMH_Dwnld-CMSEquityPlanforMedicare_090615.pdf” is corrected to read “https://www.cms.gov/About-CMS/Agency-Information/OMH/OMH_Dwnld-CMS_EquityPlanforMedicare_090615.pdf#:~:text=The%20Centers%20for%20Medicare%20%26%20Medicaid%20Services%20%28CMS%29,evidence%20base%2C%20identifying%20opportunities%2C%20and%20gathering%20stakeholder%20input”.

7. On page 94380, first column, fourth footnoted paragraph (footnote 316), lines 3 through 5, the link “<https://www.beckersasc.com/asc-coding-billing-and-collections/hopds-vsascs-10-considerations-for-2024.html>” is corrected to read “<https://www.beckersasc.com/asccoding-billing-and-collections/hopds-vs-ascs-10-considerations-for-2024.html>”.

8. On page 94407, third column, first partial paragraph,

- a. Line 19, the punctuation mark “,” is replaced with “.”
- b. Lines 19 through 22, the language “which is administered on the first day post procedure and then followed up at 14 days.” is removed.

9. On page 94411, first column, second footnoted paragraph (footnote 446), lines 4 through 8, the link “https://p4qm.org/sites/default/files/2023-09/Guidebook-of-Policies-and-Procedures-for-Pre-Rulemaking-Measure-Review-%28PRMR%29-and-Measure-SetReview-%28MSR%29-Final_0.pdf” is corrected to read “https://p4qm.org/sites/default/files/2023-09/Guidebook-of-Policies-and-Procedures-for-Pre-Rulemaking-Measure-Review-%28PRMR%29-and-Measure-Set-Review-%28MSR%29-Final_0.pdf”.

10. On page 94412, third column, first footnoted paragraph (footnote 461), lines 4 through 6, the link: "https://p4qm.org/sites/default/files/2024-02/ PRMR-Hospital-Recommendation-Group-MeetingSummary-Final.pdf" is corrected to read "https://p4qm.org/sites/default/files/2024-02/PRMR-Hospital-Recommendation-Group-Meeting-Summary-Final.pdf".

11. On page 94416, within table note **** corresponding to Table 163 titled "NEWLY FINALIZED HOSPITAL OQR PROGRAM MEASURE SET BEGINNING WITH THE CY 2027 PAYMENT DETERMINATION", line 3, section reference "XV.B.3.B" is corrected to read "XV.C.1.b".

12. On page 94417,

a. Within table note *** corresponding to Table 164 titled "NEWLY FINALIZED HOSPITAL OQR PROGRAM MEASURE SET BEGINNING WITH THE CY 2031 PAYMENT DETERMINATION", line 3, section reference "XV.B.3.B" is corrected to read section "XV.C.1.b".

b. Third column, last full paragraph, lines 3 through 10, "(77 FR 68484; 80 FR 70521, 87 FR 72110 through 72112; 78 FR 75097 through 75100; and 88 FR 82004 through 82006, respectively) for information regarding our claims-based, web-based, eCQM, chart-abstracted, PRO-PM, and survey-based data submission and reporting requirements." is corrected to read "(78 FR 75111 and 75112; 80 FR 70521 through 70522; 86 FR 63863 through 63866; 87 FR 72110 through 72112; 88 FR 82004 through 82009, respectively) for information regarding our claims-based, web-based, survey-based, chart-abstracted, eCQM, and PRO-PM data submission and reporting requirements."

13. On page 94442, first column, last paragraph, line 6, the figure "\$2.8 million" is corrected to read "2.8 million".

14. On page 94446, third column, fourth full paragraph, line 2, "that that" is corrected to read "that".

15. On page 94448, third column, second full paragraph, line 22, "communities that rely upon rely upon" is corrected to read "communities that rely upon".

16. On page 94452, third column, last paragraph, line 31 "mistrusted the health care at higher" is corrected to read as "mistrusted the health care system at higher".

17. On page 94455, second column, first fully footnoted paragraph (footnote 586), "As of November 27, 2024, HRSA has not finalized these proposed changes to FORHP's definition of rural." is corrected to read "As of the development of this final rule, HRSA had not finalized these proposed changes to FORHP's definition of rural."

18. On page 94481, third column, first partial paragraph, line 12 the word "biannual" is corrected to read "biennial".

19. On page 94483, first column,

- a. Eighth bullet, line 5, the word "biannual" is corrected to read "biennial".
- b. Last bullet, line 5 the word "biannual" is corrected to read "biennial".

20. On page 94522,

- a. Second column, last partial paragraph, line 2, the figure "four" is corrected to read "three".
- b. Third column, first partial paragraph,
 - (1) Line 1, the word "and" is inserted before "(3)".
 - (2) Line 7, the phrase "; and (4)" is corrected to read ". We are also adopting".

21. On page 94542, third column,

- a. First partial paragraph, line 17, the word "biannually" is corrected to read "biennially".
- b. First full paragraph, line 13 the word "biannual" is corrected to read "biennial".

22. On page 94561,

- a. The table title, "Table 207: Four Walls: Accounting Statement: Medicaid Clinic Services Four Walls Exceptions" is corrected to read as "TABLE 207: ACCOUNTING STATEMENT: MEDICAID CLINIC SERVICES FOUR WALLS EXCEPTIONS"
- b. Third column, first full paragraph, line 1, section reference "XXVI.B" is corrected to "XXVI.A".

23. On page 94562,

- a. First column,
 - (1) First full paragraph, line 8, section reference "XXVI.B" is corrected to "XXVI.A".
 - (2) Last paragraph, line 8, section reference "XXVI.B" is corrected to "XXVI.A".
- b. Third column, first full paragraph, line 1, section reference "XXVI.C" is corrected to "XXVI.B".

24. On page 94563,

- a. First column, first full paragraph, line 8, section reference "XXVI.C" is corrected to "XXVI.B".
- b. Second column, second full paragraph, line 1, section reference "XXVI.D" is corrected to "XXVI.C".
- c. Third column, first full paragraph, line 8, section reference "XXVI.D" is corrected to "XXVI.C".

25. On page 94569, first column, first partial paragraph, line 6 the word "biannually" is corrected to read "biennially."

26. On page 94571, bottom of the page, first column; first partial paragraph, line 12, the word "biannual" is corrected to read "biennial."

27. On page 94572,

- a. Second column, first partial paragraph, line 1, the word “biannual” is corrected to read “biennial”.
- b. Third column, first partial paragraph, line 44, the word “biannual” is corrected to read “biennial”.

28. On page 94573, third column; first partial paragraph, line 1, the word “biannual” is corrected to read “biennial”.

ASC Payment System Addenda Summary of Errors

CMS repeats the cite above regarding errors to the ASC addenda. Again, there is no CMS rule 1809-F2 on the CMS website.