Providers will see their Medicare reimbursements for hyperbaric oxygen therapy increase under the interim final rule CMS released on February 6th to correct several errors in the 2024 final Hospital Outpatient Prospective Payment (HOPPS) and Ambulatory Surgical Center (ASC) payment rule -- but the agency notes this change will cause “minor” reductions to reimbursements calculated in the same way.

“Changing this ambulatory payment classification results in a slight reduction in payment rates for other HOPPS items and services calculated using the weight scalar. As a result of the technical correction to apply the trim and the associated adjustment to the weight scalar, all payment rates and copayment amounts for items and services calculated using the weight scalar have changed in Addendum A,” CMS says in the interim final rule.

“We note that these changes to the HOPPS payments and copayments are minor,” CMS adds.

The Biden administration released the final 2024 Hospital Outpatient Prospective Payment System and Ambulatory Surgical Center payment rule on November 2, 2023 where it finalized a $9 billion lump sum payment for 340B hospitals affected by Medicare payment cuts the Supreme Court deems unlawful, plus a new payment program to let Medicare reimburse intensive outpatient services for treating behavioral health and substance use disorder.

CMS says it also neglected to factor in the cost of a device used in the kidney histotripsy procedures, resulting in a payment rate of $12,500.50 and a minimum adjusted copayment of $2,500.10. CMS’ interim final rule would increase those payments to $17,500.50 along with a minimum unadjusted copayment of $3,500.10.

The correction also clarifies that rural emergency health providers can preview their health quality reporting program data before its published, rather than review and correct the information over the 30-day prepublication period.

While stakeholders are still welcome to comment on the final rule, which will go into effect immediately, CMS made its case for why the usual notice and comment requirements shouldn’t apply.

“Undertaking further notice and comment procedures to incorporate the corrections in this document into the final rule with comment period or delaying the effective date would be contrary to the public interest because it is in the public’s interest for providers to receive appropriate payments in as timely a manner as possible, and to ensure that the CY 2024 HOPPS/ASC final rule with comment period reflects our policies,” CMS said.

“Furthermore, such procedures would be unnecessary, as we are not altering our payment methodologies or policies, but rather, we are simply correctly implementing the policies that we previously proposed, requested comment on, and subsequently finalized,” the agency added.

Updated 2024 hospital outpatient and ASC payment rates are on the AAPM website at: AAPM Government Affairs - CMS - CY 2024 Health Policy Update