

CMS ISSUES 2024 HOSPITAL OUTPATIENT & AMBULATORY SURGICAL CENTER FINAL RULE

The Hospital Outpatient Prospective Payment System (HOPPS) and Ambulatory Surgical Center (ASC) Payment System final rule was issued on November 2, 2023. All final rule policies and payments are effective on January 1, 2024.

Under the HOPPS, hospital reimbursement is based on Ambulatory Payment Classifications (APCs). The Centers for Medicare and Medicaid Services (CMS) assigns CPT and HCPCS codes to an APC based on clinical and resource use similarity. All services in an APC are reimbursed at the same rate.

CMS updates the payment rates for hospital outpatient departments and ASCs that meet applicable quality reporting requirements by 3.1 percent overall in 2024. (See final HOPPS APC payments below.)

Summary of 2024 Radiation Oncology Hospital Outpatient Payments

APC	Description	CPT Codes	2023 Payment	2024 Payment	Percentage Change 2023-2024
5611	Level 1 Therapeutic Radiation Treatment Preparation	77280, 77299, 77300, 77331, 77332, 77333, 77336, 77370, 77399	\$133.38	\$129.41	-3.0%
5612	Level 2 Therapeutic Radiation Treatment Preparation	77285, 77290, 77306, 77307, 77316, 77317, 77318, 77321, 77334, 77338	\$358.72	\$352.41	-1.8%
5613	Level 3 Therapeutic Radiation Treatment Preparation	32553, 49411, 55876, 77295, 77301, C9728	\$1,340.67	\$1,321.58	-1.4%
5621	Level 1 Radiation Therapy	77401, 77402, 77789, 77799	\$122.39	\$114.37	-6.6%
5622	Level 2 Radiation Therapy	77407, 77412, 77600, 77750, 77767, 77768, 0394T	\$262.93	\$256.33	-2.5%
5623	Level 3 Radiation Therapy	77385, 77386, 77423, 77470, 77520, 77610, 77615, 77620, 77761, 77762	\$572.47	\$561.45	-1.9%
5624	Level 4 Radiation Therapy	77605, 77763, 77770, 77771, 77772, 77778, 0395T	\$721.72	\$683.84	-5.2%
5625	Level 5 Radiation Therapy	77522, 77523, 77525	\$1,323.22	\$1,353.02	2.3%
5626	Level 6 Radiation Therapy	77373	\$1,767.45	\$1,701.89	-3.7%
5627*	Level 7 Radiation Therapy	77371, 77372, 77424, 77425	\$7,690.57	\$7,427.37	-3.4%
5723	Level 3 Diagnostic Tests	76145	\$483.43	\$511.20	5.7%

*Comprehensive APC

CMS is finalizing, with modification, the adoption of an additional measure in the Hospital Outpatient Quality Reporting (OQR) Program—the adoption of the Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults electronic clinical quality measure (eCQM) to promote patient safety. CMS is finalizing this measure with modification to extend the voluntary reporting period to a total of two years prior to requiring mandatory reporting beginning with the CY 2027 reporting period for the CY 2029 payment determination. The additional year of voluntary reporting would allow time to monitor implementation progress with regards to data collection burden and response rates.

CMS will continue to package diagnostic radiopharmaceuticals in 2024 while considering stakeholder comments.

2024 HOPPS & ASC Payments and the Final Rule Summary are available at:

https://www.aapm.org/government_affairs/CMS/2024HealthPolicyUpdate.asp