

## 3rd QUARTER ASP UPDATE Effective: July 1, 2023

We would like to take this opportunity to thank you for your continued interest and support of LEVULAN<sup>®</sup> KERASTICK<sup>®</sup> (aminolevulinic acid HCl) for topical solution, 20% PDT (photodynamic therapy).

Medicare payment for physician administered drugs is based upon the products' Average Sales Price (ASP) plus six percent. Medicare Carriers now receive quarterly updates of the ASP for drugs directly from the Centers for Medicare and Medicaid Services (CMS). Therefore, the Medicare allowable for LEVULAN KERASTICK is subject to change each year at the beginning of each quarter (January, April, July and October 1).

**Effective July 1, 2023 the Medicare allowable (ie, ASP + 6%) for J7308 (LEVULAN KERASTICK) will be \$391.23.**

If you have any questions regarding Medicare reimbursement for DUSA products, LEVULAN KERASTICK, or any related CPT<sup>®</sup> codes, please contact our reimbursement partner, The Pinnacle Group at **1-866-369-9290** or email us at **Levulan@SunAccessSupport.com** and we will be happy to assist you.

Thank you again for your continued support of LEVULAN KERASTICK PDT.

With the expiration of the Consolidated Appropriations Act of 2021, reimbursement rates are changing. As of April 1, 2022, the typical Medicare Physician Fee Schedule (PFS) outpatient reimbursement rate will be adjusting to 5.1% for all outpatient-administered medical benefit products. Practices should look at all components of reimbursement rates, including PFS and medication pricing, to understand how this will impact a practice.

The presence of a CPT code or HCPCS product code does not by itself guarantee coverage or payment at a particular level. Insurers have widely varying coverage and payment policies. Always confirm with individual insurance companies the codes to bill and the coverage policies that will apply to a particular patient. DUSA and The Pinnacle Health Group do not guarantee that the use of this information presented above will ensure coverage or payment for the product or the procedure. This document is for educational purposes only. Physicians should use independent judgment when selecting codes that most appropriately describe the services rendered to a patient. Physicians are responsible for compliance with individual insurance company billing and reimbursement requirements.