Payment Allowance Limits for Medicare Part B Drugs
Effective July 1, 2011 through September 30, 2011

Note 1: Payment allowance limits subject to the ASP methodology are based on 1Q11 ASP data.

Note 2: The absence or presence of a HCPCS code and the payment allowance limits in this table does not indicate Medicare coverage of the drug. Similarly, the inclusion of a payment allowance limit within a specific column does not indicate Medicare coverage of the drug in that specific category. These determinations shall be made by the local Medicare contractor processing the claim.

HCPCS Code	Short Description	HCPCS Code Dosage	Payment Limit	Vaccine AWP%	Vaccine Limit	Infusion AWP%	DME Infusion Limit
90732	Pneumococcal vaccine	0.5 ML	57.194	95	57.194		
90740	Hepb vacc, ill pat 3 dose im	40 MCG	119.415	95	119.415		
90746	Hep b vaccine, adult, im	20 MCG	59.708	95	59.708		
90747	Hepb vacc, ill pat 4 dose im	40 MCG	119.415	95	119.415		
J0360	Hydralazine hcl injection	20 MG	4.200				
J0610	Calcium gluconate injection	10 ML	0.493				
J0636	Inj calcitriol per 0.1 mcg	0.1 MCG	0.364				
J0690	Cefazolin sodium injection	500 MG	0.622				
J0696	Ceftriaxone sodium injection	250 MG	0.935				
J0713	Inj ceftazidime per 500 mg	500 MG	1.984				
J0744	Ciprofloxacin iv	200 MG	1.152				
J0882	Darbepoetin alfa, esrd use	1 MCG	3.120				
J0886	Epoetin alfa 1000 units ESRD	1000 UNITS	9.824				
J0895	Deferoxamine mesylate inj	500 MG	9.786			95	15.630
J1030	Methylprednisolone 40 MG inj	40 MG	2.435				
J1080	Testosterone cypionat 200 MG	200 MG	6.085				
J1270	Injection, doxercalciferol	1 MCG	3.184				
J1580	Garamycin gentamicin inj	80 MG	0.947				
J1644	Inj heparin sodium per 1000u	1000 UNITS	0.287				
J1720	Hydrocortisone sodium succ i	100 MG	3.876				
J1756	Iron sucrose injection	1 MG	0.382				
J1955	Inj levocarnitine per 1 gm	1 GM	6.808				
J1956	Levofloxacin injection	250 MG	5.343				
J2060	Lorazepam injection	2 MG	0.723				
J2501	Paricalcitol	1 MCG	2.655				
J2550	Promethazine hcl injection	50 MG	1.673				
J2765	Metoclopramide hcl injection	10 MG	0.386				
J2916	Na ferric gluconate complex	12.5 MG	4.639				
J2997	Alteplase recombinant	1 MG	42.034				
J3250	Trimethobenzamide hcl inj	200 MG	5.800				
J3260	Tobramycin sulfate injection	80 MG	2.434				
J3360	Diazepam injection	5 MG	0.742				
J3370	Vancomycin hcl injection	500 MG	2.935				
J3420	Vitamin b12 injection	1000 MCG	0.362				
Q4081	Epoetin alfa, 100 units ESRD	100 UNITS	0.982				

***** For Kentucky Medicaid - These rates are effective July 1, 2011 through June 30, 2012