

## **Part B Insider (Multispecialty) Coding Alert**

### **More CAP Details You Need To Know**

In Transmittal 839, CMS also explains that:

- CAP vendors will be chosen every three years, for each geographic area. Each vendor must have the means to deliver drugs within that geographic area, be able to ship at least five days a week, and meet quality standards. The vendors must be financially solvent and have appeals and grievance procedures in place.
- Participating physicians must receive all their drugs from the vendors, except in the exceptions mentioned above. Physicians must bill for the drugs using the "J1" (non-payable) modifier, to indicate that the vendor will receive payment.
- Group practices must choose as a group to enroll in the CAP program.

If some members of the group don't send in an enrollment form, the carrier may contact those group members verbally to request their information. The carriers can't remove members of a group from the CAP provider "table," unless they confirm that they've left the group.