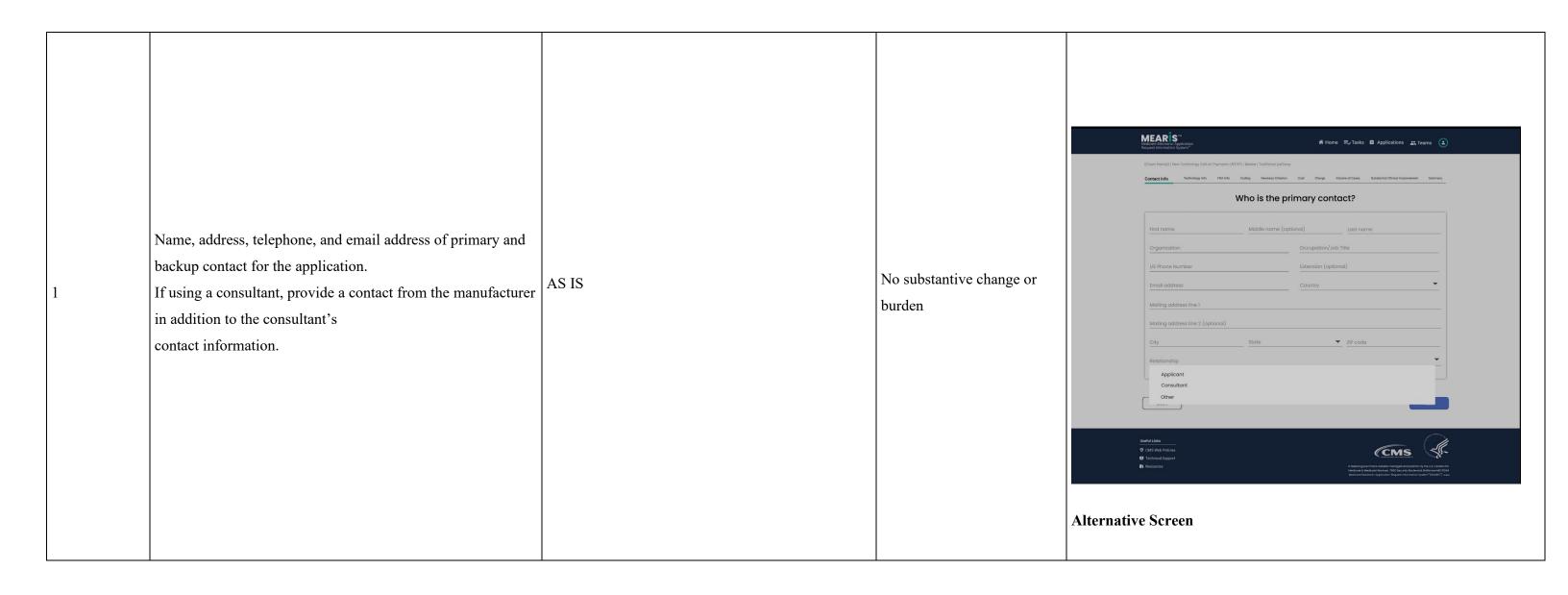
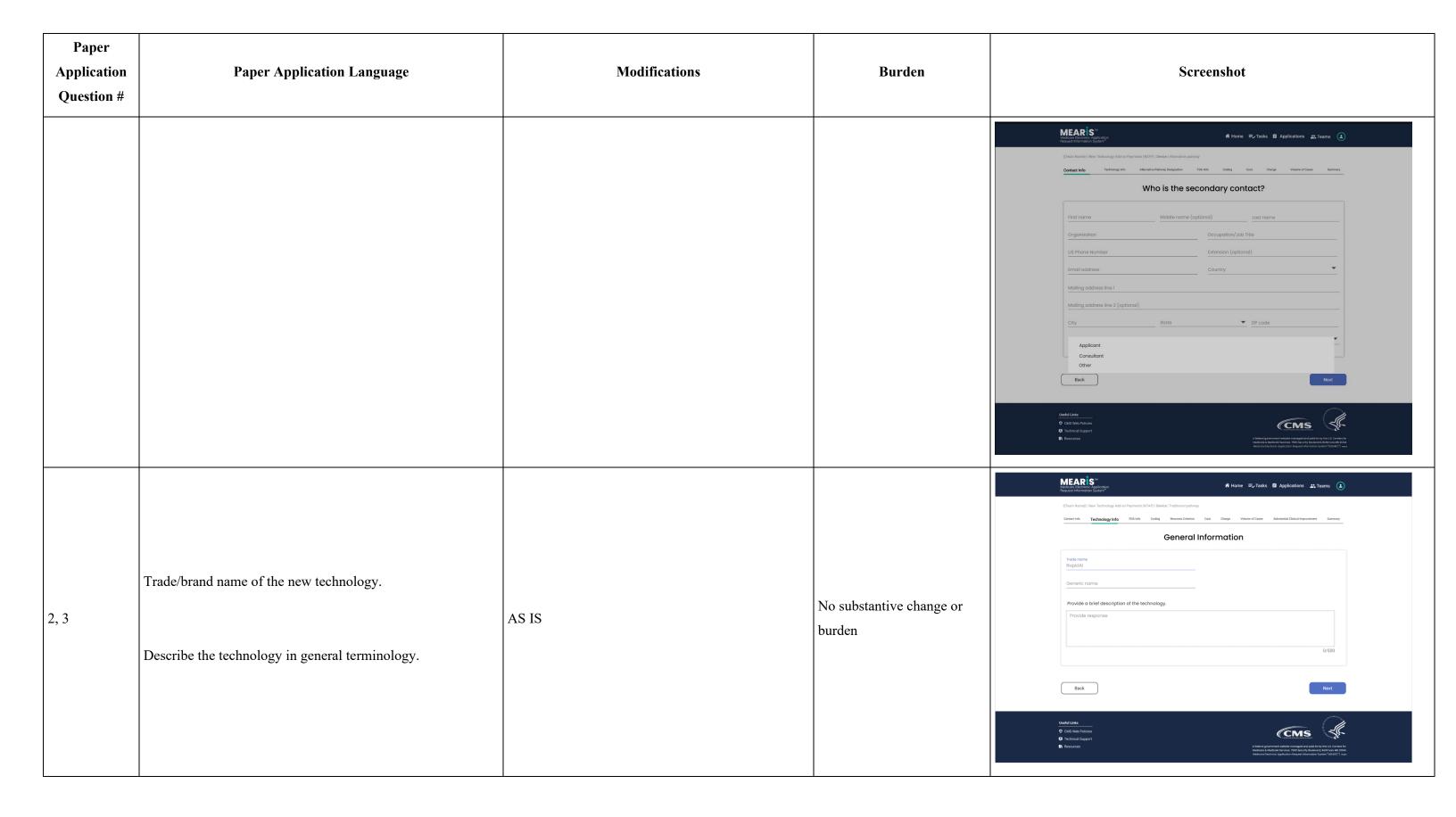
NTAP Crosswalk-2023

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
Throughout paper application.	Currently the pathway questions are split across the paper application	Applicants need to include this information in the current paper application narrative, but we have consolidated on this screen to create the skip patterns that allow the system to only display the relevant questions to the specific pathway chosen.	No substantive change or burden	Let's set up your NTAP application You will not be able to after or change these selections in the application Which of the following describes the new technology for which you are applying for NTAP? Which of the following describes the new technology for which you are applying for NTAP? Belect which NTAP pathway you are applying under. For additional information on the alternative pathways for transformative new devices and certain antimicrobial products, please refer to the NTAP Criteria and Pathways information. Atternative (QIDP/LPAD) Traditional





Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
3	Describe the technology in general terminology. - What is it? What does it do? How is it used? - Also, submit relevant descriptive booklets, brochures, package inserts, as well as copies of published peer-reviewed articles relevant to the new medical services and technologies.)	AS IS	No substantive change or burden	## Henrie ## Transis @ Applications ## Land

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
15	Devices: If the technology is a device, is there an investigational device exemption (IDE) number from the FDA assigned to the device? If yes, please provide this code. Refer to http://www.fda.gov/MedicalDevice/InvestigationalDeviceExemptionIDE/ucm051480.htm for more details. Devices: If the technology is a device, what class (I, II, or III) was/is assigned to the device? Refer to http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/overview/default.htm for more details.	technology has been added to this question set to ensure applicants do not forget to tell CMS about this. Currently, it is required to be included in the narrative, and the vast majority of applicants do include this information in their application. If they do not include it, CMS currently asks the applicant to provide the information during the review of the application.	No substantive change or burden	# Name # Parks

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
13	Drugs: If the technology is a drug, is this a drug that can only be administered orally? Drugs: If the technology is a drug, provide complete dosage information.	AS IS Whether the technology has ever been the subject of a recall or subject to any bulletins and/or letters issued by the FDA regarding the safety of the technology has been added to this question set to ensure applicants do not forget to tell CMS about this. Currently, it is required to be included in the narrative, and the vast majority of applicants do include this information in their application. If they do not include it, CMS currently asks the applicant to provide the information during the review of the application.	No substantive change or burden	# Name

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
4	Have you submitted an outpatient application for pass-through payments under the Medicare outpatient prospective payment system? If so, please provide the tracking number or, if it was approved, please provide the date of approval. Refer to http://www.cms.gov/Medicare/MedicareFee-for-Service-Payment/HospitalOutpatientPPS/index.html for more information.	AS IS	No substantive change or burden	## Home Tasks Applications Teams

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
4	Question 4 (Continued) Have you submitted an outpatient application for pass-through payments under the Medicare outpatient prospective payment system? If so, please provide the tracking number or, if it was approved, please provide the date of approval. Refer to http://www.cms.gov/Medicare/MedicareFee-for-Service-Payment/HospitalOutpatientPPS/index.html for more information.	AS IS	No substantive change or burden	# Home Spread & Application Committee Committee

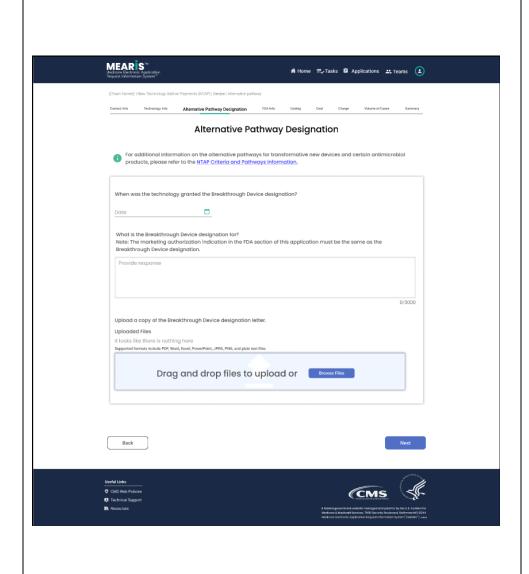
Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
5	Alternative New Technology Pathway for Transformative New Devices Is the technology a device that has received a Breakthrough Device designation from the Food and Drug Administration (FDA)? If yes, skip questions 6 through 21 (newness) and 34-36 (substantial clinical improvement) and proceed to question 22 - 33 (cost criterion). For additional details on the Alternative Pathway we refer applicants to 84 FR xxxxx – xxxxx for additional details.	AS IS	No substantive change or burden	Content No. Proceed No. Proceed Applications Applica

Is the technology a device that has received a Breakthrough Device designation from the Food and Drug Administration (FDA)? If yes, skip questions 6 through 21 (newness) and 34-36 (substantial clinical improvement) and proceed to question 22 - 33 (cost criterion). For additional details on the Alternative Pathway we refer applicants to 84 FR xxxxx – xxxxx for additional details.

Date of Food and Drug Administration (FDA) (or expected) approval for the technology, service, or drug. Provide a copy of the FDA approval/clearance letter. If approval has not yet been granted, please provide a copy of the approval notice to CMS immediately after it becomes available. Note: Include all types of approvals (i.e. Pre-Market Approval, HDE or HUD approval, expanded access approval) the technology, service or drug received prior to submission of this application and/or is currently seeking. CMS recommends a timeline if the technology, service, or drug has received multiple types of approvals from the FDA. Per § 412.87(c) of the regulations, an applicant for new technology add-on payments (NTAP) must receive FDA approval or clearance for its new medical service or technology by July 1 prior to the beginning of the fiscal year (FY) for which the NTAP would be effective (for FY 2021, not later than July 1, 2020).

Components of this question are now specified, that would have been required to be included in the narrative response previously. Applicants also currently provide this information in the FDA approval letter.

No substantive change or burden



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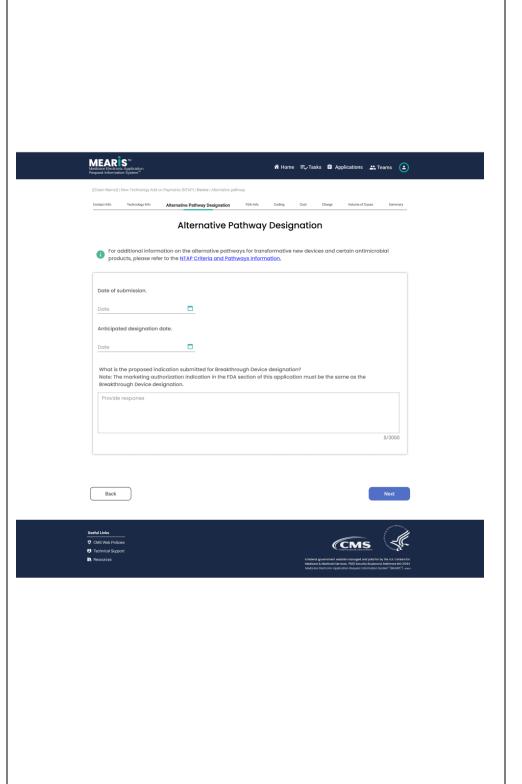
Alternative New Technology Pathway for Transformative New Devices

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Components of this question are now specified, that would have been required to be included in the narrative response previously. This information is also included in the FDA approval letter.

No substantive change or burden



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Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
5,8	Is the technology a device that has received a Breakthrough Device designation from the Food and Drug Administration (FDA)? Date of Food and Drug Administration (FDA) (or expected) approval for the technology, service, or drug. Provide a copy of the FDA approval/clearance letter. If approval has not yet been granted, please provide a copy of the approval notice to CMS immediately after it becomes available. Note: Include all types of approvals (i.e. Pre-Market Approval, HDE or HUD approval, expanded access approval) the technology, service or drug received prior to submission of this application and/or is currently seeking. CMS recommends a timeline if the technology, service, or drug has received multiple types of approvals from the FDA. Per § 412.87(c) of the regulations, an applicant for new technology add-on payments (NTAP) must receive FDA approval or clearance for its new medical service or technology by July 1 prior to the beginning of the fiscal year (FY) for which the NTAP would be effective (for FY 2021, not later than July 1, 2020).	We have further broken out the breakthrough device designation to include these subcategories, so that applicants can skip questions that are not relevant. This information is included in the FDA approval letter.	No substantive change or burden	A Hone Extrada © Applications © Trams © Cheer shamed the technology received a QIDP designation or approval under the LPAD pathway from FDA? CIPP Designation UPAD Approval Both CIPP Designation and UPAD Approval Hos not received a QIDP designation or Approval under the UPAD pathway from FDA? CIPP Designation UPAD Approval Both CIPP Designation or Approval under the UPAD pathway Final Received a QIDP designation or Approval under the UPAD pathway CIPP Designation UPAD Approval Both CIPP Designation or Approval CIPP Designation or Approval Under the UPAD pathway CIPP Designation or Approval UPAD pathway

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
5, 8	Based on: Is the technology a device that has received a Breakthrough Device designation from the Food and Drug Administration (FDA)? Date of Food and Drug Administration (FDA) (or expected) approval for the technology, service, or drug. Provide a copy of the FDA approval/clearance letter. If approval has not yet been granted, please provide a copy of the approval notice to CMS immediately after it becomes available. Note: Include all types of approvals (i.e. Pre-Market Approval, HDE or HUD approval, expanded access approval) the technology, service or drug received prior to submission of this application and/or is currently seeking. CMS recommends a timeline if the technology, service, or drug has received multiple types of approvals from the FDA. Per § 412.87(c) of the regulations, an applicant for new technology add-on payments (NTAP) must receive FDA approval or clearance for its new medical service or technology by July 1 prior to the beginning of the fiscal year (FY) for which the NTAP would be effective (for FY 2021, not later than July 1, 2020).	Components of this question are now specified for applicants that receive a special designation from the FDA only. Applicants are currently required to provide this information to CMS in the narrative response in the paper application. This information is included in the FDA approval letter.	No substantive change or burden	Command the Section of Sec

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
8	Date of Food and Drug Administration (FDA) (or expected) approval for the technology, service, or drug. Provide a copy of the FDA approval/clearance letter. If approval has not yet been granted, please provide a copy of the approval notice to CMS immediately after it becomes available. Note: Include all types of approvals (i.e. Pre-Market Approval, HDE or HUD approval, expanded access approval) the technology, service or drug received prior to submission of this application and/or is currently seeking. CMS recommends a timeline if the technology, service, or drug has received multiple types of approvals from the FDA. Per § 412.87(c) of the regulations, an applicant for new technology add-on payments (NTAP) must receive FDA approval or clearance for its new medical service or technology by July 1 prior to the beginning of the fiscal year (FY) for which the NTAP would be effective (for FY 2021, not later than July 1, 2020).	AS IS - This question is broken down throughout the FDA section.	No substantive change or burden	# Hone Applications

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
8,12	Date of Food and Drug Administration (FDA) (or expected) approval for the technology, service, or drug. Provide a copy of the FDA approval/clearance letter. If approval has not yet been granted, please provide a copy of the approval notice to CMS immediately after it becomes available. Note: Include all types of approvals (i.e. Pre-Market Approval, HDE or HUD approval, expanded access approval) the technology, service or drug received prior to submission of this application and/or is currently seeking. CMS recommends a timeline if the technology, service, or drug has received multiple types of approvals from the FDA. Per § 412.87(c) of the regulations, an applicant for new technology add-on payments (NTAP) must receive FDA approval or clearance for its new medical service or technology by July 1 prior to the beginning of the fiscal year (FY) for which the NTAP would be effective (for FY 2021, not later than July 1, 2020). If the technology is a drug, was/is your FDA application considered under Fast Track, Breakthrough Therapy, Accelerated Approval, or Priority Review? Refer to http://www.fda.gov/forconsumers/byaudience/forpatientadvocates/speedingaccesstoimportantne wtherapies/ucm128291.htm for more details.	Request for indication has been added to this question set to ensure applicants do not forget to include this detail. Currently, it is required to be included in the narrative, and the vast majority of applicants include this. If an applicant does not provide the information, CMS will obtain the information from the applicant.	No substantive change or burden	## House Francis Propher Section Propher Proph

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8	Date of Food and Drug Administration (FDA) (or expected) approval for the technology, service, or drug. Provide a copy of the FDA approval/clearance letter. If approval has not yet been granted, please provide a copy of the approval notice to CMS immediately after it becomes available. Note: Include all types of approvals (i.e. Pre-Market Approval, HDE or HUD approval, expanded access approval) the technology, service or drug received prior to submission of this application and/or is currently seeking. CMS recommends a timeline if the technology, service, or drug has received multiple types of approvals from the FDA. Per § 412.87(c) of the regulations, an applicant for new technology add-on payments (NTAP) must receive FDA approval or clearance for its new medical service or technology by July 1 prior to the beginning of the fiscal year (FY) for which the NTAP would be effective (for FY 2021, not later than July 1, 2020).	AS IS - This question is broken down throughout the FDA section.	No substantive change or burden	# House ID_Table ID Application ID Select IP Note to 900k TOA application Word to the date of TOA application Description ID

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Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
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Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
9	List the name and phone number of a contact at the FDA who is knowledgeable about the premarket approval request for the new technology listed	AS IS	No substantive change or burden	# Home Tasks
11	Was the technology, service of drug available on the market immediately after FDA approval? If not, please provide the date that the medical service or technology came on the market (i.e. first sales or availability) and an explanation and documentation of any delay (i.e. manufacturing issues, shelf life concerns, or other reasons).	AS IS - This question is broken down throughout the FDA section.	No substantive change or burden	Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval? Was this technology available on the market immediately after FDA approval.

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
11	Was the technology, service of drug available on the market immediately after FDA approval? If not, please provide the date that the medical service or technology came on the market (i.e. first sales or availability) and an explanation and documentation of any delay (i.e. manufacturing issues, shelf life concerns, or other reasons).	AS IS - This question is broken down throughout the FDA section.	No substantive change or burden	From the Control of Page 1 Page 1

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
10	Date of Food and Drug Administration (FDA) (or expected) approval for the technology, service or drug. Provide a copy of the FDA approval/clearance letter. If approval has not yet been granted, please provide a copy of the approval notice to CMS immediately after it becomes available. Note: Include all types of approvals (i.e. Pre-Market Approval, HDE or HUD approval, expanded access approval) the technology, service or drug received prior to submission of this application and/or is currently seeking. CMS recommends a timeline if the technology, service or drug has received multiple types of approvals from the FDA. Per § 412.87(c) of the regulations, an applicant for new technology add-on payments (NTAP) must receive FDA approval or clearance for its new medical service or technology by July 1 prior to the beginning of the fiscal year (FY) for which the NTAP would be effective (for FY 2021, not later than July 1, 2020). Please describe the (most recent, if applicable) type of application and approval the technology, service or drug has received or is seeking from the FDA (i.e. Pre-Market Approval, HDE or HUD approval, expanded access approval, New Drug Approval).	AS IS - This question is broken down throughout the FDA section.	No substantive change or burden	WEAR STATE OF THE

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
Coding Note	Note: If the technology, device, or drug (administered via procedure) were to receive add-on payment status approval, it would need to be distinctly identifiable by ICD-10-CM/PCS diagnosis and/or procedure code(s) on the claim in order to receive the add-on payment. The ICD-10 Coordination and Maintenance (C&M) Committee is responsible for approving coding changes, developing errata, addenda and other modifications. Requests for coding changes are submitted to the committee for discussion at either the Spring or Fall C&M meeting. If any coding changes are necessary to distinctly identify your technology by ICD-10-CM/PCS diagnosis and or procedure code(s), you MUST separately contact the ICD-10 C&M Committee to submit a code request. Refer to https://www.cms.gov/Medicare/Coding/ICD10/newrevisedcodes.html for more details including deadline to submit code request.	AS IS	No substantive change or burden	Chean Name() Note Tabulany Add on Paparents (2004) (Decise) The State of State Chean C

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
17	Coding: List the diagnosis and/or procedure codes that are currently or will be used to identify your technology under the ICD-10-CM/PCS coding system.	AS IS – this question has been broken down to separate code types	No substantive change or burden	Chart Name Non-Technology Add-on-Payments PCTA Roberts Technology Add-on-Payments Technology Add-on-Payme

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
17-18	Coding: List the diagnosis and/or procedure codes that are currently or will be used to identify your technology under the ICD-10-CM/PCS coding system. Do the codes listed in question 17 distinctly identify your technology under the ICD-10-CM/PCS coding system? If not, please see the note above.	AS IS with one exception: Request now specific to indication to ensure clarity in applicants' responses. Currently, this detail is required to be included in	No substantive change or burden	Plant land Plant Plant

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
18	Coding: Do the codes listed in question 17 distinctly identify your technology under the ICD-10-CM/PCS coding system? If not, please see the note above. REQUIRED INFORMATION Applications must include a response to each question below. Information must be entered directly onto this form. Do not copy and paste questions and		No substantive change or	MEARING Secretaries Applications Applications Applications Applications Applications (Communication Systems (Commu
Preamble	answers into a different document. CMS may request other information in order to evaluate specific requests. Note: A separate application is required for each distinct technology or service included in a request. For example, if an applicant requests add-on payments for two unique technologies or services, a separate application is required for each technology or service. A completed tracking form. (A tracking form may be downloaded at http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/newtech.html .)		burden	Have you submitted or will you be submitting an application for a unique ICD-10-PCS code? Description Useful Lake C CASK file Produces The Produced Support Ankiers gravered and any operation of the State Cartien for Management and State Cartien for Management

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
19	Coding: List any other technologies coded using the code(s) listed in question 17. For example, if you listed a single procedure code, what procedures use the code listed in question 17 aside from the procedure used for your technology? Similarly, if you listed a combination or multiple codes in question 17, what other procedures or technologies use the same combination of codes listed in question 17 aside from your technology?	AS IS	No substantive change or burden	# Nome #
20	Coding: Does the service or technology have an existing request pending with the ICD-10 C&M Committee?	AS IS	No substantive change or burden	Home Tasks Applications Applications Teams Applications Teams Applications Teams Teams Teams Applications Teams Teams

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
6 tı	f applicable, briefly describe current and/or alternative reatments for the disease or condition hat your technology treats or diagnoses.	AS IS	No substantive change or burden	Hence Solve Tracks Committee Note N

	above.			
	Applicants must explain why they do not meet the criteria			
	an existing technology.			The first management of the first properties of the fi
	and the same or similar patient population when compared to			0 CMS (F
	the same or similar type of disease			
	c. If the new use of the technology involves the treatment of			Sock Next
	to an existing technology; and			413000
	b. If a product is assigned to the same DRG when compared		ourdon	0/3000
I	technology to achieve a therapeutic outcome; and	AS IS	burden	Explain why are why not? Proyids response
7	when compared to an existing		No substantive change or	
	a. If a product uses the same or a similar mechanism of action			Does the use of the technology involve treatment of the same or similar type of disease and patient population when compared to an existing technology? © Yes No
	below:			0/3000
	A technology is not "new", if it meets all three of the criteria			
	additional details.)			Explain why or why not? Provido response
	and 74 FR 43813 through 43814 for			® Yes ○ No
	existing technology. (Refer to 70 FR 47351 through 47352			Has the technology been assigned to the same MS-DRG when compared to an existing technology to achieve a therapeutic outcome?
	determine if a technology is similar to an			0/3000
	CMS has established a substantial similarity criteria to			Provide response
2111011011111010				Explain why or why not?
Criterion Note			burden	
Newness		AS IS	No substantive change or	Does the technology use the same or a similar mechanism of action when compared to existing technology to achieve a therapeatic outcome?
	questions 5 through 20 (newness criterion).			47352 and 74 FR 43813 through 43854 for additional details.) 1 A technology can be considered "new" as long as one of the three criteria are NOT met
	Breakthrough Device designation from the FDA, skip			To qualify for a new technology odd-on payment, the technology or service must not be reflected in the data used to establish the Medicare-Severity Diagnosis Related Groups (MS-DRGs). CMS has established three substantial similarity criteria to determine if a technology is similar to an existing technology. (Refer to 70 FE 4735) through
	above if the technology is a device has received a			Substantial Similarity Criteria
	Related Groups (MS-DRGs). As noted			Serbed Mrt. Technologymbo (SA wils Coding Newwood Cellaridge Sort Charge Waluns of Saxon Substantial Since Among Survey)
	in the data used to establish the Medicare-Severity Diagnosis			MEARIES* Service of the product of
	technology or service must not be reflected			MEAR'S"
	Note: To qualify for a new technology add-on payment, the			
	Newness Criterion			

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
7	Applicants must explain why they do not meet the criteria above.	AS IS.	No substantive change or burden	Elean transport production Street hearing (twen factorizing Adder Purposes) (2014) (brokes Traditional pathway) Contact fine Tourising Adder Purposes) (2014) (brokes Traditional pathway) Contact fine Tourising Adder Purposes) (2014) (brokes Traditional pathway) Newmess Criterion Summary Places briefly summarifies your responses to the previous slide regarding how the technology meets the newness criterion overall. Provide response Upload files related to the newness criterion or add comments to an existing file, as needed (optional) Upload files If locals like threat is conting here Supported femals include PKE was every prevention, 4PKB, PKB, and piles ten files Drag and drop files to upload or Browne Files Black Next Park Like Provide Reported femals include PKE was every prevention, 4PKB, PKB, and piles ten files Upload files Black

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
22	Cost Information What is the (current and/or anticipated) cost of the technology to the hospital, per patient?	AS IS	No substantive change or burden	Home Surface Applications Ap

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
Procede calco calco (e.g pati brea pati	st Information ovide a breakdown of how the cost of the technology is culated: g. For drugs, the average dosage or number of units per ient (ml/kg/hr); For devices, a akdown of the cost of all of the components used per ient, clearly showing which imponents are the "new" ones).	AS IS	No substantive change or burden	# Home #_Tasks

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
23	Cost Information Provide a breakdown of how the cost of the technology is calculated: (e.g. For drugs, the average dosage or number of units per patient (ml/kg/hr); For devices, a breakdown of the cost of all of the components used per patient, clearly showing which components are the "new" ones).	AS IS	No substantive change or burden	(Tream Amend) New Trachrology Add on Prymeris (ITAR) Drug Traditional pathway Constact the Trachrology Add on Prymeris (ITAR) Drug Traditional pathway Cost Breakdown (1) Include a breakdown of how the cost of the drug/therapeutic agent is calculated. What is the (current and/or anticipated) cost of the drug/therapeutic agent to the hospital, per patient? Include the average dosage and number of Vials (whole Vials if single-use) and/or units per patient (mi/kg/ln)* Explanation Back Next Next Cost Breakdown (1) Include a breakdown of how the cost of the drug/therapeutic agent to the hospital, per patient? Include the average dosage and number of Vials (whole Vials if single-use) and/or units per patient (mi/kg/ln)* Explanation O/3000
		Optional upload. In the old application, they could upload anything they deemed relevant.	No substantive change or burden	Contact Man Applications Contact Man C

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
24	Charge Information: Under the MS-DRG grouper for FY 2020, list the MS-DRGs that the technology currently maps to?	AS IS	No substantive change or burden	(Chean Name) New Technology Add on Physical (NTAP) (Decise) Traditional pathway Contact Mark Technology Add on Physical (NTAP) (Decise) Traditional pathway MS—DRGS Under the MS—DRG grouper for FY 2023, list oil of the MS—SRGs that the technology currently maps to based on the Indicaction (allagnosis) for which the technology has received or is seeking FDA approvat. MS—DRG code list NS—DRG code list
25	Charge Information: Has the applicant made a request for the new technology to map to a new or different MS-DRG(s) for the upcoming fiscal year (2021) other than the ones listed in question 24?	AS IS	No substantive change or burden	MEAR'S Water Statement Agriculture (Itsen Named) (Nor Technology Add so Payments (NCIAP) Devices Traditional gathway Centred table. Technology Add so Payments (NCIAP) Devices Traditional gathway MS-DRG mapping Howe you made a request to map to a new or different MS-DRG(s) for the upcoming Fiscal Year 2024? (Itsen Named) Yes No Comments. Provide response Dack Next District Link Outful Link Out

	Cost Criterion			
	Note: To qualify for a new technology add-on payment, the			
	technology or service must result in			
	average charges for cases using the technology in excess of			
	the thresholds established for the FY			
Cost Criterion	(lesser of 75 percent of the standardized amount increased to			
Note	reflect the difference between costs			
	and charges or 75 percent of 1 standard deviation beyond the			_
	geometric mean standardized charge		About Cost Criterion	×
	for all cases in the MS-DRGs to which the new technology is		To qualify for a new technology add-on payment, the technology or service must result in average charges for cases	
	assigned) of the annual IPPS final rule.	0	using the technology in excess of the thresholds established with the release of the most recent annual IPPS final rule (lesser of 75 percent of the standardized amount increased to reflect the difference between costs and charges or 75	
	The most recent version of the thresholds can be downloaded	t	percent of 1 standard deviation beyond the geometric mean standardized charge for all cases in the MS-DRGs to which the new technology is assigned). The most recent version of the thresholds can be downloaded at <a "fy="" (for="" (https:="" 2022="" 2023="" a="" acuteinpatientpps="" and="" applicants="" applications="" applications,="" are="" be="" can="" ccr="" ccrs="" center="" click="" come="" correction="" cost="" example,="" factor="" factor"="" factors="" final="" fiscal="" for="" found="" from="" fy="" home="" href="https://creation.org/linears/new for for Septice Property Instituted Institute Instit</td><td></td></tr><tr><td></td><td>at</td><td>N N</td><td>www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteinpatientPPS/newtech [2] Note: If the technology is proposed to be assigned to a proposed new MS-DRG in the upcoming annual IPPS proposed rule, then per the policy CMS finalized in the FY 2021 IPPS final rule, CMS uses the proposed threshold for the upcoming</td><td></td></tr><tr><td></td><td>http://www.cms.gov/Medicare/Medicare-Fee-for-Service-</td><td></td><td>fiscal year for any proposed new MS-DRG to evaluate the cost criterion.</td><td></td></tr><tr><td></td><td>Payment/AcuteInpatientPPS/newtech.html Charge Information:</td><td>burden</td><td>The inflation factor and cost center cost-to-charge ratios (CCRs) can be found in the " if="" in="" inflation="" instead.="" ipps="" left="" medicare="" medicare-fee-for-service-payment="" monitor="" most="" must="" notice).="" notice,="" occurs="" of="" on="" or="" page="" page").<="" page;="" recent="" release="" rule="" september.="" should="" spreadsheet="" spreadsheet.="" tab="" td="" the="" then="" these="" those="" thresholds,="" updated="" used="" usually="" values="" which="" www.cms.gov="" year=""><td></td>	
	(26) Using the table as demonstrated in the spreadsheet as a		Ok	
	template, show how the standardized			
	charge per case (if applicable, case weighted) exceeds the			
26	threshold for the cost criterion.			
	Note: Refer to Appendix A for an explanation of how to			
	standardize charges. Refer to the			
	spreadsheet in the application packet how to case weight the			
	average standardize charge per			
	case if multiple MS-DRGs are affected by the technology.			

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
27	Charge Information: With regard to the spreadsheet in question 26, provide all supporting data used to calculate charges and standardized charges per case involving the new technology (in electronic format).	AS IS	No substantive change or burden	((Sean barrel)) the following Advance Proposeds (PCAP) (Device Traditional pathways) ((Sean barrel)) their following Advance Proposeds (PCAP) (Device Traditional pathways) Consist the "Braketing Advance Proposeds (PCAP) (Device Traditional pathways) Consist the "Braketing Advance Proposeds (PCAP) (Device Traditional pathways) Cost Criterion Methodology Within regards to the cost carrely as proceedablest, places a surrevorted the assurpporting data cased to colonized changes and stransportified changes (part cases involving this new to exclude grift (PCAP) (P

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
28	standardized charge (i.e. Medicare and/or non[1]Medicare, number of providers, time period from which data was	This provides space for a column-by-column explanation instead of an open field to standardize applicant responses. Most applicants already used a column-by-column approach in their narrative response.	No substantive change or burden	# Note: \$2,7185 @ Applications and France Company Co

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
28	List a step by step explanation of how the data and calculations in each column of the spreadsheet were determined. For example, within the explanation applicants must include the type of data used to calculate the average standardized charge (i.e. Medicare and/or non[1]Medicare, number of providers, time period from which data was collected) and/or the inflation factor used to inflate the charges etc An application is NOT complete without a complete step by step explanation of the applicant's charge methodology.	This provides space for a column-by-column explanation instead of an open field to standardize applicant responses. Most applicants already used a column-by-column approach in their narrative response.	No substantive change or burden	Manual Revision State State Stat

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
28	List a step by step explanation of how the data and calculations in each column of the spreadsheet were determined. For example, within the explanation applicants must include the type of data used to calculate the average standardized charge (i.e. Medicare and/or non[1]Medicare, number of providers, time period from which data was collected) and/or the inflation factor used to inflate the charges etc An application is NOT complete without a complete step by step explanation of the applicant's charge methodology.	This provides space for a column-by-column explanation instead of an open field to standardize applicant responses. Most applicants already used a column-by-column approach in their narrative response.	No substantive change or burden	MEANS Control of the Control of

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
28	number of providers, time period from which data was	This provides space for a column-by-column explanation instead of an open field to standardize applicant responses. Most applicants already used a column-by-column approach in their narrative response.	No substantive change or burden	## Command of the process of the control of the following services and the process of the control of the following services of the control of the following services of the control of the following services of the services

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
29	Charge Information: What is the (current and/or anticipated) charge of the technology by the hospital, per patient? Explain how this was determined.	AS IS	No substantive change or burden	(Chart Name) New Technology Add on Phymeris (NTAP) bog Traditional pathway Contact the Technology will Fish with Coding Newness Offices Out Online Out

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
30	Volume of Cases: (30) What is the anticipated Medicare volume of this technology for FY 2020 (October 1, 2019 – September 30, 2020)? Please describe how you arrived at this estimate. This estimate should be based on the actual or projected sales of your technology, not the total population eligible for the technology.			# Home Tasks
	Volume of Cases:	AS IS	No substantive change or burden	Upcaming Fiscal Year Anticipated Inpatient Medicare Volume Please describe how you arrived at this estimate. Determination details
32	(32) What is the anticipated Medicare volume of this technology for FY 2021 (October 1, 2020 – September 30, 2021). Please describe how you arrived at this estimate. This estimate should be based on the actual or projected sales of your technology, not the total population eligible for the technology.			Deck Code Web Policies

Paper Application Question #	Paper Application Language	Modifications	Burden	Screenshot
31	Volume of Cases: (31) What is the anticipated Non-Medicare volume of this technology for FY 2020 (October 1, 2019 – September 30, 2020). Please describe how you arrived at this estimate. This estimate should be based on the actual or projected sales of your technology, not the total population eligible for the technology.		No substantive change or	Contact Section Applications A
	Volume of Cases:	AS IS	burden	Upcoming Fiscal Year Anticipated Inpatient Non-Medicare Volume Please describe how you arrived at this estimate. Determination details
33	(33) What is the anticipated Non-Medicare volume of this technology for FY 2021 (October 1, 2020 – September 30, 2021). Please describe how you arrived at this estimate. This estimate should be based on the actual or projected sales of your technology, not the total population eligible for the technology.			Useful Links C. CLUS With Philoses C. CLUS With Philoses Technical Support R. Resources Resources

Substantial Clinical Improvement Criterion: Note: A summary on the substantial clinical improvement criteria can be found in Appendix B. Complete information on the substantial clinical improvement criterion can be found in the September 7, 2001 Federal Register (66 FR 46913-14) and in the FY 2010 Final Rule (74 FR 43808-43823). Additionally, the annual final rule for # Home = Tasks Applications ∴ Teams Substantial prior years includes CMS's decision Clinical making process on each application. As noted above if the Substantial Clinical Improvement Criterion Improvement technology is a device has received a A summary on the substantial clinical improvement criterion can be found in Appendix B. Additional information on the substantial clinical improvement criterion can be found in the September 7, 2001 Federal Register (66 FR 48913-14), the FY 2010 IPPF Final Rule (74 FR 4808-4323) and the FY 2020 IPPF Final Rule (64 FR 42288-42292). Additionally, the annual IPPS final rule includes CMS' decision making process for each application. Criterion Note Breakthrough Device designation from the FDA, skip Reworded as individual questions to clarify for the questions 33 through 35 (substantial clinical applicant and allow for a more straightforward improvement criterion). response. This also consolidates information that No substantive change or was required to be included in subsequent burden Convert posters to word documents or to provide a questions/tables. All information would have been summary document of all posters. included previously. 34, 35, 36 Back (34) Appendix B has descriptions of the substantial clinical improvement criteria, which are associated with treatments, diagnosis, and clinical outcomes. Using Appendix B, identify and describe how the technology meets the criteria for substantial clinical improvement over existing technologies. (35) Provide an annotated list and copies of published peerreviewed articles relevant to the new service or technology. In the annotation, please clearly summarize each article,

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	Substantial Clinical Improvement Criterion:			
Substantial Clinical Improvement Criterion Note	Note: A summary on the substantial clinical improvement criteria can be found in Appendix B. Complete information on the substantial clinical improvement criterion can be found in the September 7, 2001 Federal Register (66 FR 46913-14) and in the FY 2010 Final Rule (74 FR 43808-43823). Additionally, the annual final rule for prior years includes CMS's decision making process on each application. As noted above if the technology is a device has received a Breakthrough Device designation from the FDA, skip questions 33 through 35 (substantial clinical improvement criterion). Convert posters to word documents or to provide a summary document of all posters. (34) Appendix B has descriptions of the substantial clinical improvement criteria, which are associated with treatments, diagnosis, and clinical outcomes. Using Appendix B, identify and describe how the technology meets the criteria for substantial clinical improvement over existing technologies.	Reworded as individual questions to clarify for the applicant and allow for a more straightforward response. This also consolidates information that was required to be included in subsequent questions/tables. All information would have been included previously.	No substantive change or burden	The Find Case Invalidation (See Finance) (SEP) (See Challens) (See
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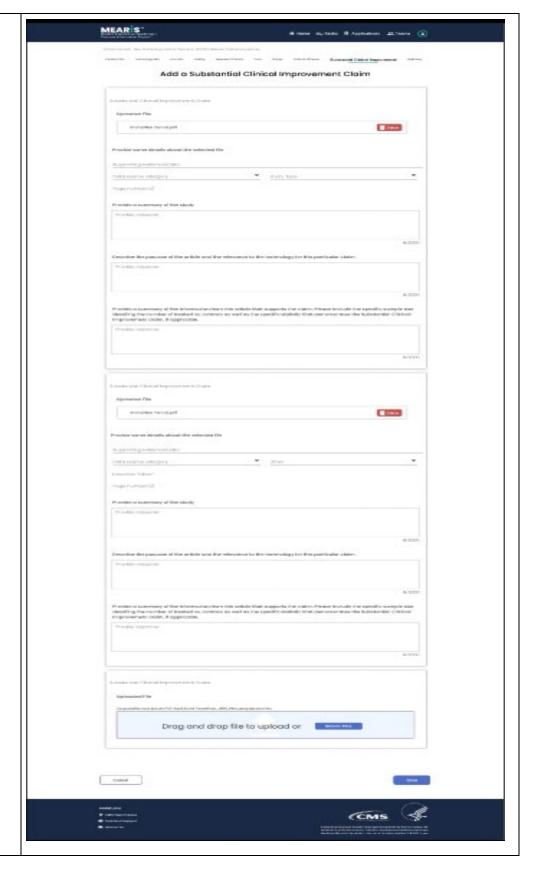
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(34) Appendix B has descriptions of the substantial clinical improvement criteria, which are associated with treatments, diagnosis, and clinical outcomes. Using Appendix B, identify and describe how the technology meets the criteria for substantial clinical improvement over existing technologies.

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No substantive change or burden



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Substantial Clinical Improvement	Note: A summary on the substantial clinical improvement criteria can be found in Appendix B. Complete information on the substantial clinical improvement criterion can be found in the September 7, 2001 Federal Register (66 FR 46913-14) and in the FY 2010 Final Rule (74 FR 43808-43823). Additionally, the annual final rule for prior years includes CMS's decision making process on each application. As noted above if the technology is a device has received a Breakthrough Device designation from the FDA, skip questions 33 through 35 (substantial clinical	Reworded as individual questions to clarify for the		** Home *** Tasks *** Applications *** Teams (Transmission of the colors
	improvement criterion). Convert posters to word documents or to provide a summary document of all posters.	applicant and allow for a more straightforward response. This also consolidates information that was required to be included in subsequent questions/tables. All information would have been	No substantive change or burden	Claim 1(claim name)) # Claim 2((claim name)) # Claim 2((claim name)) # Claim 3((claim name)) # Delete Delete
4, 35, 36	(34) Appendix B has descriptions of the substantial clinical improvement criteria, which are associated with treatments, diagnosis, and clinical outcomes. Using Appendix B, identify and describe how the technology meets the criteria for substantial clinical improvement over existing technologies.	included previously.		Category Puge No Page No Study Summany Category Study Summany Description of the Compare mortality prate between Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 (pr. 0.02) Gen 203 Data used to compare mortality prate between Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 (pr. 0.02) Gen 203 Data used to compare mortality prate between Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 (pr. 0.02) Data used to compare mortality prate between Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality prate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate for Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rate Drug 123 vs. 759 for disease X resulting in a St. discrease in mortality rat
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	questions concerning the table.			

	Substantial Clinical Improvement Criterion:			
	Note: A summary on the substantial clinical improvement			
	criteria can be found in Appendix B.			MEAR S [™] Nedocraf larganization Request Information System (A Home ≡, Tasks © Applications ⊈. Teams (Request Information System (
	Complete information on the substantial clinical			Request Information System" ((Team Name)) New Technology Add on Payments (VTAP) (Device Traditional pullway)
	improvement criterion can be found in the			Contact info Technology info FSA info Coding Newwest Citation Cost Charge Williams of Classics Substantial Clinical Improvement Summary
	September 7, 2001 Federal Register (66 FR 46913-14) and in			Substantial Clinical Improvement Criterion Criterion 2
Substantial	the FY 2010 Final Rule			Does the new medical service or technology offer the ability to diagnose a medical condition in a patient population where that medical condition is currently undetectable or offers the ability to diagnose a medical condition earlier in a
Clinical	(74 FR 43808-43823). Additionally, the annual final rule for			patient population than allowed by currently available methods? If so, describe how use of the new medical service or technology to make a diagnosis affects the management of the patient using evidence.
Improvement	prior years includes CMS's decision			Yes No Please explain why the technology does or does not meet this criterion using supporting data.
_	making process on each application. As noted above if the			Explanation
	technology is a device has received a			0/3000
	Breakthrough Device designation from the FDA, skip	Devended as individual exactions to classify for the		
	questions 33 through 35 (substantial clinical	Reworded as individual questions to clarify for the		Back Next
	improvement criterion).	applicant and allow for a more straightforward	NT 1 4 4 1	
	·	response. This also consolidates information that	No substantive change or	Useful Links © CMS We Politices Ø Technical Report
	Convert posters to word documents or to provide a	was required to be included in subsequent	burden	A finite grantees an extended consequent angle and to a year A. Comman for twelvers are A selected or Force. The Selected has been also and the selected force. The Selected force and
	summary document of all posters.	questions/tables. All information would have been		
		included previously.		
34, 35, 36	(34) Appendix B has descriptions of the substantial clinical			
	improvement criteria, which are associated with treatments,			
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Substantial Clinical

Improvement
Criterion Note

34, 35, 36

making process on each application. As noted above if the technology is a device has received a Breakthrough Device designation from the FDA, skip questions 33 through 35 (substantial clinical improvement criterion).

(74 FR 43808-43823). Additionally, the annual final rule for

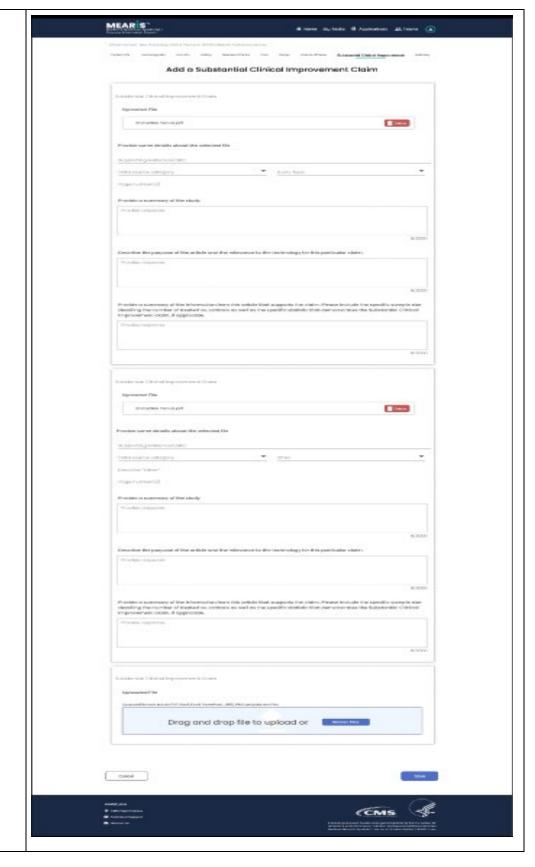
prior years includes CMS's decision

Convert posters to word documents or to provide a summary document of all posters.

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No substantive change or burden



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Improvement	technology is a device has received a			Confact bifs Technology bifs Fish bifs Coding Newwess Offseton Cost Charge Volume of Coass Substantial Clinical Improvement Summery
Criterion Note	Breakthrough Device designation from the FDA, skip questions 33 through 35 (substantial clinical improvement criterion).	Reworded as individual questions to clarify for the applicant and allow for a more straightforward response. This also consolidates information that	No substantive change or	Add a Substantial Clinical Improvement Claim Substantial Clinical Improvement Claim Uploaded File Supported formats include PDF, Word, Excel, PowerPoint, JPEG, PNQ, and plain test files
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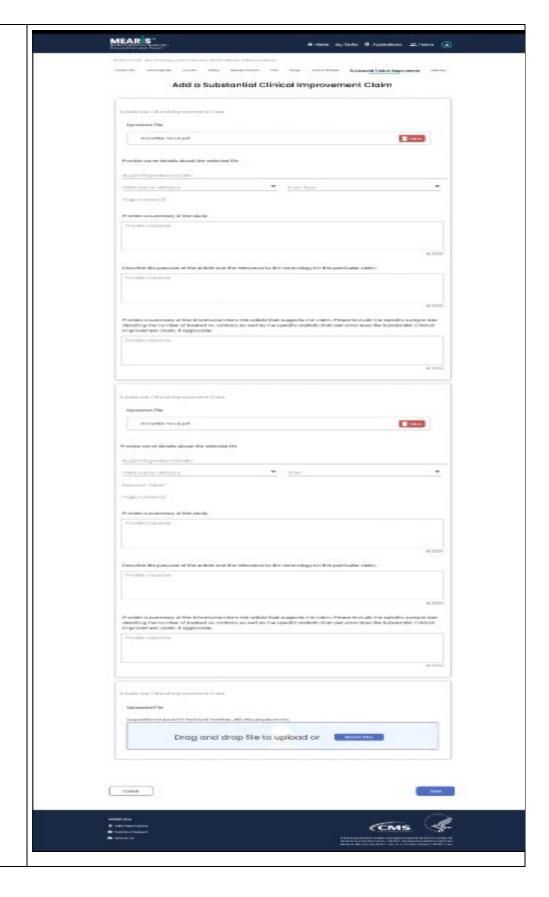
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