



**News Flash** – As stated in the Centers for Medicare & Medicaid Services (CMS) provider listserv messages that were sent last fall concerning Change Requests (CRs) 6417 and 6421, CMS has made available a file that contains the National Provider Identifier (NPI) and the name (last name, first name) of all physicians and non-physician practitioners who are of a type/specialty that is eligible to order and refer in the Medicare program and who have current enrollment records in Medicare (i.e., they have enrollment records in Medicare's systems that contain an NPI). This file is downloadable by going to the Medicare provider/supplier enrollment website at <http://www.cms.hhs.gov/MedicareProviderSupEnroll> and clicking on "Ordering/Referring Report" on the left-hand side.

MLN Matters® Number: MM6359

Related Change Request (CR) #: 6359

Related CR Release Date: February 5, 2010

Effective Date: July 1, 2010

Related CR Transmittal #: R634OTN

Implementation Date: July 6, 2010

## Reporting the Beneficiary's Residence State Code and ZIP Code for Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Claims

### Provider Types Affected

This article is for suppliers submitting claims to Durable Medical Equipment Medicare Administrative Contractors (DME MACs) for DMEPOS services provided to Medicare beneficiaries.

### Provider Action Needed

This article is based on change request (CR) 6359 which states that, effective for claims processed on July 6, 2010 and later, the ZIP Code of the beneficiary's address of residence should be reported on the claim. Make certain your billing staffs are aware of this requirement.

### Background

Currently, the Centers for Medicare & Medicaid Services (CMS) uses the beneficiary's address of residence to determine the applicable fee schedule amount for claims for DMEPOS items. When National Competitive Bidding (NCB) is fully implemented, the ZIP code of the beneficiary's address of residence, as

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reported on the claim, will also be used in pricing DMEPOS claims. If the beneficiary's ZIP code information is not available on the claim, the DME MACs will deny the claim using a reason code of 16 (Claims/Service lacks information which is needed for adjudication.) and remark code MA37 (Missing/incomplete/invalid patient's address).

## Additional Information

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If you have questions, please contact your Medicare DME MAC at their toll-free number which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

The official instruction, CR6359, issued to your DME MAC regarding this change may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R634OTN.pdf> on the CMS website.

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