Related MLN Matters Article #: MM3845

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MMA – Enrolling Indian Health Service (IHS) Facilities as Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Suppliers

Key Words

MM3845, CR3845, R133PI, IHS, DMEPOS, supplier, durable, medical, equipment, prosthetics, orthotics, supplies, NSC, MMA

Provider Types Affected

Indian Health Services (IHS) facilities wishing to enroll as Medicare suppliers

Key Points

- The effective date of the instruction is January 1, 2005.
- The implementation date is April 3, 2006.
- The Medicare Modernization Act (MMA, Section 630) permits IHS facilities to bill directly for itemized DMEPOS as of January 1, 2005.
- Previously IHS facilities could not directly bill Medicare for DMEPOS.
- To enable direct billing of DMEPOS, an IHS facility must enroll with the National Supplier Clearinghouse (NSC) and secure a Medicare supplier billing number.

Application

- To enroll, the IHS facility must complete a Medicare Supplier Enrollment Application: CMS-855S Application for DMEPOS Suppliers.

Facility Requirements

- Site visits will be required for all IHS facilities enrolling for DMEPOS.
- All IHS facilities must be exempt from the comprehensive liability insurance requirements under 42 FR Sec. 424.57(c)(10).
- All IHS facilities will be exempt from the requirement to provide any state licenses for their facility/business. However, if they provide a DMEPOS item that requires a licensed professional to properly provide the item, the IHS facility must provide a copy of the professional license.

Assignment of Specialty Codes and Appropriate Billings

- For any IHS facility that enrolls, the NSC will issue a supplier number with:
  - An A9 specialty code for newly enrolled IHS DMEPOS suppliers which are not hospitals; or
  - An A9/A0 specialty code for newly enrolled IHS DMEPOS suppliers which are IHS/tribal hospitals and hospital based facilities to include critical access hospitals (CAHs).
- The specialty indicator will ensure that the claims are paid appropriately by either the fiscal intermediary (FI) or durable medical equipment regional carrier (DMERC).
- IHS facilities with a specialty code of A9/A0 must submit claims for prosthetics, orthotics, and surgical dressings to their Medicare FI for payment and not to a DMERC.
- IHS facilities that are tribally owned and/or operated are advised that their Medicare beneficiaries are not responsible for deductibles or coinsurance. However, Medicare still pays these IHS facilities a payment that is at 80 percent of the DMEPOS fee schedule. The remaining 20 percent will be shown as a "CO" denial on the remittance advice with an adjustment reason code of "B6" indicating *"This payment is adjusted when performed/billed by this type of provider, by this type of provider in this type of facility, or by a provider of this specialty."*

Important Links

http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM3845.pdf

The official instruction (CR3845) issued may be viewed by going to *http://www.cms.hhs.gov/transmittals/downloads/R133PI.pdf* on the CMS website.

For questions, affected providers should contact their DMERC/carrier/intermediary at their toll-free number, which may be found at *http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip* on the CMS website.