



Related MLN Article #: MM4372

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Payment for Power Mobility Device (PMD) Claims

Key Words

MM4372, CR4372, R2150TN, PMD, Mobility, Device, Wheelchair, G0372, E/M, G0372, Prescription, Payment

Provider Types Affected

Physicians, providers, and non-physician practitioners billing Medicare Carriers, Durable Medical Equipment Regional Carriers (DMERCs), Regional Home Health Intermediaries (RHHIs), and/or Fiscal Intermediaries (FIs) for power mobility devices (PMDs) and services related to prescribing PMDs

Key Points

- The effective date of the instruction is January 1, 2006.
- The implementation date is no later than March 24, 2006.
- **MLN Matters article MM4372 was revised on March 24, 2006, to emphasize that providers submitting claims on or after April 1, 2006, must bill the E/M and the G0372 code on the same claim.**
- The Centers for Medicare & Medicaid Services (CMS) published an interim final rule on PMDs to conform its regulations to section 302(a)(2)(E)(iv) of the Medicare Modernization Act (MMA), which is codified at section 1834(a)(1)(E)(iv) of the Social Security Act (SSA).
- The effective date of the rule was October 25, 2005.
- For PMDs, the MMA mandated that:
 - A face-to-face examination of the individual be conducted by a physician, a physician assistant, a nurse practitioner, or a clinical nurse specialist; and
 - Payment may not be made for a motorized or power wheelchair unless the physician or treating practitioner has written a prescription for the item.
- By defining the practitioners who are allowed to conduct the face-to-face examination, the rule also effectively removed the current requirement that a beneficiary must be seen by a specialist in physical medicine, orthopedic surgery, neurology, or rheumatology in order to get a power-operated vehicle (POV).

- The other key change made by this regulation is a requirement that the physician or treating practitioner must submit pertinent parts of the medical record (in lieu of the Certificate of Medical Necessity (CMN)), along with the prescription, to the durable medical equipment (DME) supplier within 30 days of the face-to-face examination.
- A separate add-on payment (an add-on payment to the office visit billed with the code of G0372) was established by the rule to recognize the additional physician work and resources required for submitting pertinent parts of the medical record.
- Payment for the history and physical examination is made through the appropriate evaluation and management (E/M) code along with the add-on payment (G0372), which goes to the local Medicare FI or carrier.
- The PMD claim will go to the local DMERC.
- Title II, Section 222, of the Departments of Labor, Health and Human Services, and Education and Related Agencies Appropriations Act, 2006 (H.R. 3010) (the Appropriations Act) was signed into law on December 30, 2005.
- Title II, Section 222 states, in part, that none of the funds made available under this Act may be used to implement or enforce the interim final rule published in the FR by the CMS on August 26, 2005, (70 FR. 50940) prior to April 1, 2006.
- CMS is instructing DMERCs and/or DME Program Safeguard Contractor (PSC) that, between January 1, 2006, and April 1, 2006, contractors will only pay PMD claims that satisfy the requirements of section 1834(a)(1)(E)(iv) of the SSA.
- Based on the Appropriations Act, CMS is instructing FIs and carriers to hold claims that contain G0372 through March 31, 2006.
- Carriers will begin to release physician claims for processing on April 3, 2006.
- For additional information regarding PMDs review the following MLN Matters articles:
 - MM4121: MMA - New G Code for Power Mobility Devices (PMDs)
<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM4121.pdf> on the CMS website.
 - MM3952: MMA - Evidence of Medical Necessity: Power Wheelchair and Power Operated Vehicle (POV)/Power Mobility Device (PMD) Claims
<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM3952.pdf> on the CMS website.

Important Links

<http://www.cms.hhs.gov/Transmittals/downloads/R215OTN.PDF>

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM4372.pdf>

If you have questions, please contact your Medicare carrier, DMERC, FI, or RHHI at their toll-free number, which may be found at <http://www.cms.hhs.gov/apps/contacts/> on the CMS website.