



Related MLN Matters Article #: MM5107

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## New Durable Medical Equipment Prosthetic, Orthotics, and Supplies (DMEPOS) Transcutaneous Electrical Nerve Stimulators (TENS) Certificate of Medical Necessity (CMN) for Purchases

### Key Words

MM5107, CR5107, R168PI, DMEPOS, TENS, Transcutaneous, Nerve, Stimulator

### Provider Types Affected

Providers and suppliers using CMNs when billing Medicare durable medical equipment regional carriers (DMERCs) or DME Medicare Administrative Contractors (DME MACs) for the purchase of TENS

### Key Points

- The effective date of the instruction is October 2, 2006.
- The implementation date is January 2, 2007.
- The Centers for Medicare & Medicaid Services (CMS) has recently developed improved CMNs that were approved by the Office of Management and Budget (OMB). The OMB approved form number for the [CMS-848](#) is OMB# 0938-0679.
- The revised Transcutaneous Electrical Nerve Stimulators (TENS) CMN will **only apply to purchases**.
- Beginning January 1, 2007, **CMNs for TENS rentals will not be required**.
- DMERCs and DME MACs will allow suppliers to submit a partially completed unsigned TENS CMN for claims submitted on or after October 2, 2006, and ending on December 31, 2006.
- Guidance for providers and suppliers on how to partially complete the unsigned TENS CMN for rentals during the transition period include the following:
  - The answers to questions 2 and 4 of Section B of the CMN may be left blank.
  - Section C of the CMN may be left blank.
  - In Section D of the CMN, enter a "yes" in the "Physician's Signature" field and enter the delivery date in the "Signature Date" field.
  - For hardcopy CMNs, only complete Section A and leave other sections blank.

- Providers and suppliers should also:
  - Enter the date of service (i.e., the delivery date) in the “initial” date field in Section A of the CMN;
  - Enter all other information in the Section A fields of the CMN that are required currently;
  - Enter 99 in the “Est. Length of Need” field in Section B of the CMN;
  - Enter the primary diagnosis in the “diagnosis codes” field in Section B of the CMN;
  - Enter “D” as the answer to questions 1, 3, and 6 of Section B of the CMN; and
  - Enter “5” as the answer to question 5 of Section B of the CMN.

**Note:** Providers must use the old CMN forms for this transition period (dates of service on or after October 1, 2006, and ending on December 31, 2006).

### Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5107.pdf> on the CMS web site.

The official instruction issued regarding this change may be viewed at

<http://www.cms.hhs.gov/Transmittals/downloads/R168PI.pdf> on the CMS web site.

For more information regarding the revised CMN forms, providers may view the MLN Matters article MM4296, which is available at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM4296.pdf> on the CMS web site.

If providers/suppliers have questions, they may contact their Medicare DME MAC or DMERC at their toll-free number, which may be found at

<http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS web site.