



Related Medlearn Matters Article #: MM3607

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Replacement of Change Request (CR) 3373 – Payment to Providers/Suppliers Qualified to Bill Medicare for Prosthetics and Certain Custom-Fabricated Orthotics

Key Words

CR3607, CR3373, MM3607, P&O Billing, Prosthetics, Orthotics, DMERC Claims, New Edits, Specialty Codes, NSC, Enrollment Application, DMERC

Provider Types Affected

Physicians, pedorthists, physical therapists, occupational therapists, orthotics personnel, and prosthetics personnel who provide or supply Prosthetics and Orthotics (P&O) billing Medicare Durable Medical Equipment Regional Carriers (DMERCs)

Key Points

- The effective date of this instruction is July 1, 2005
- Medicare will only reimburse for prosthetics and certain custom-fabricated orthotics (P&O) when furnished by physicians, pedorthists, physical therapists, occupational therapists, orthotics personnel, and prosthetics personnel as recognized by the appropriate specialty code
- Section 1834(h)(1)(F) of the Act specifies that no payment is to be made for custom-fabricated orthotics and prosthetics unless furnished by a qualified practitioner or a qualified supplier
- CR 3607 establishes new edits in the DMERC claims processing system to look for particular specialty codes to assure that those providers specifying P&O on their Enrollment Application Forms are the only entities billing Medicare for P&O supplies
- CMS has deemed that certain specialties (who are licensed or certified by the State, when applicable) are qualified to furnish prosthetics and certain custom-fabricated orthotics, and may bill for Medicare services when State law permits them to furnish a prosthetic or orthotic item
These qualified specialties (and their specialty codes) are:
 - Medical Supply Company with Orthotics Personnel – Specialty Code 51;
 - Medical Supply Company with Prosthetics Personnel – Specialty Code 52;
 - Medical Supply Company with Orthotics and Prosthetics Personnel – Specialty Code 53;
 - Orthotics Personnel – Specialty Code 55;

- Prosthetics Personnel – Specialty Code 56;
- Orthotics Personnel, Prosthetics Personnel, and Pedorthists – Specialty Code 57;
- Physical Therapist – Specialty Code 65;
- Occupational Therapist – Specialty Code 67; and
- All Physician Specialty Codes listed in Manual 100.04 Chapter 26, Section 10.8.2
- National Supplier Clearinghouse (NSC) is responsible for maintaining a central data repository for information regarding suppliers
- If providers want to bill to Medicare for P&O, they should check with the NSC to ensure that their correct specialty code is on file
- If providers need to update their file with the correct code, they must submit to the NSC a “Change of Information” on the CMS 855S form
- NSC will transmit this information to the provider’s DMERC
- The effective date for the new or revised specialty code for P&O claims will be the date the NSC issues the specialty code. The new or revised specialty code will not be applied retroactively.

Important Links

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/MM3607.pdf>

http://www.cms.hhs.gov/manuals/pm_trans/R445CP.pdf