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LIST SERVE MESSAGE: MEDICARE ANNOUNCES NEW PAOC MEMBERS AND THE PUBLICATION OF THE INTERIM FINAL RULE WITH COMMENT PERIOD (IFC) FOR THE COMPETITIVE ACQUISITION PROGRAM FOR CERTAIN DURABLE MEDICAL EQUIPMENT, PROSTHETICS, ORTHOTICS, AND SUPPLIES (DMEPOS)

Subject: Medicare DMEPOS Competitive Bidding Program Announcements

The Centers for Medicare & Medicaid Services (CMS) has announced that an Interim Final Rule with Comment Period, which implements certain provisions of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) for the Round 1 Rebid of the Medicare Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Acquisition Program, is on display at the Federal Register.

CMS has also announced the appointment of new members to serve on the Program Advisory and Oversight Committee (PAOC) for the DMEPOS competitive bidding program.

Visit the CMS web site at http://www.cms.hhs.gov/CompetitiveAcqforDMEPOS/ to view the list of PAOC members and for the latest information on the DMEPOS competitive bidding program.


Medicare Announces New PAOC and Publication of Interim Final Rule

The Centers for Medicare & Medicaid Services (CMS) has announced the appointment of new members to serve on the Program Advisory and Oversight Committee (PAOC) for the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) competitive bidding program. These new members will advise CMS as it proceeds with the restart of the competitive bidding program. The list of PAOC members is available at http://www.cms.hhs.gov/DMEPOSCompetitiveBid/downloads/paoc_member_list.pdf.

CMS has also announced an interim final rule with comment period (IFC) implementing certain limited changes, required by the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA), to the DMEPOS competitive bidding program. The rule may be viewed at http://edocket.access.gpo.gov/2009/pdf/E9-863.pdf.

This IFC addresses the MIPPA provisions that affect Round 1 of the DMEPOS competitive bidding program. In particular, it announces the delay of Round 1 of the program from 2007 to

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2009. The 2009 Round 1 competition, also known as the Round 1 rebid, will occur in the same metropolitan statistical areas (MSAs) as the 2007 Round 1 bidding, excluding Puerto Rico. The product categories for 2009 will be the same as those selected for the 2007 Round 1 bidding, with the exception of negative pressure wound therapy (NPWT) and Group 3 complex rehabilitative wheelchairs. To view the CBAs/Product Categories, click on the "Product Categories, Items, and HCPCS" link in the left menu.

Group 3 complex rehabilitative wheelchairs are also excluded from all subsequent rounds of competition.

The IFC also announces the delay of Round 2 of the program from 2009 to 2011, the national mail order program until after 2010 and competition in additional areas, other than mail order, until after 2011.

In addition to the delay of the competitive bidding program, the IFC implements the MIPPA process for providing feedback to suppliers regarding missing financial documentation. Suppliers that submit financial documents within a specified time period known as the covered document review date will be notified by CMS regarding any missing financial documentation. If a bidder is notified, it has ten business days to submit the proper information to CMS. This notice only applies to the receipt of the financial documents. It does not include a review of the accuracy of the documents submitted or whether the documents meet applicable requirements. The requirements for bid application will be detailed in the request for bids (RFB).

The IFC also implements the MIPPA provision requiring DMEPOS suppliers that are awarded a contract under the program to disclose information to CMS on each subcontracting relationship. While contract suppliers may use subcontractors for certain limited services, the contract suppliers retain responsibility for ensuring that all services under their contracts are appropriately furnished. Contract suppliers must also provide information on whether each subcontractor meets the applicable accreditation requirements. The statute requires that this information be provided to CMS within a specified timeframe.

Lastly, the IFC implements the MIPPA exemption for hospitals that provide certain types of durable medical equipment (DME). Specifically, hospitals are exempted from the competitive bidding program when they provide certain types of DME items, like crutches, walkers, and canes, to their own patients during an admission or on the date of discharge.

Suppliers wishing to participate in the Round 1 rebid, including those CMS contract suppliers that were awarded contracts in the delayed Round 1, will need to submit a new bid application in the Round 1 rebid. As in the 2007 Round 1 program, suppliers will be required to meet all applicable eligibility, financial, quality and accreditation standards. The MIPPA changes that are addressed in this IFC do not alter the fundamental requirements of the final regulation for the competitive bidding program published on April 10, 2007. There are other MIPPA provisions that affect later rounds of the competitive bidding program that will be addressed in future rulemaking or program guidance.
Sent: 1/26/2009

Subject: Medicare Billing Requirements and Policies for Replacement of Oxygen Equipment and Oxygen Contents

Medicare Billing Requirements and Policies for Replacement of Oxygen Equipment and Oxygen Contents

This message is for suppliers and home health agencies that furnish oxygen and oxygen equipment to Medicare beneficiaries

Suppliers of oxygen and oxygen equipment need to be aware of the procedures for submitting claims for oxygen and oxygen equipment following the enactment of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) on July 15, 2008.

Section 144(b) of MIPPA took effect on January 1, 2009, and repeals the requirement for you to transfer title to oxygen equipment to the beneficiary after the 36 month payment cap mandated by the Deficit Reduction Act of 2005. Section 144(b) of MIPPA also establishes new payment rules and supplier responsibilities following the 36 month payment period. See MLN Matters number SE0840 for additional information about these new rules. This listserv message provides specific instructions for submitting claims for oxygen contents and replacement of oxygen equipment.

REPLACEMENT OF OXYGEN EQUIPMENT

New HCPCS Modifier for Replacement of DME

Effective January 1, 2009, the following modifiers was added to the Healthcare Common Procedure Coding System (HCPCS):

RA – Replacement of a DME item;

This modifier is to be used on claims for replacement of oxygen equipment with dates of service on or after January 1, 2009. HCPCS modifier RP, which was discontinued effective December 31 2008, remains in effect for claims with dates of service prior to January 1, 2009.

- If oxygen equipment is replaced because the equipment has been in continuous use by the patient for the equipment’s reasonable useful lifetime or is lost, stolen, or irreparably damaged, the patient may elect to obtain a new piece of equipment. Irreparable damage
refers to a specific incident of damage to equipment such as equipment falling down a flight of stairs as opposed to equipment that is worn out over time. In these situations, a new 36-month rental period and new reasonable useful lifetime is started on the date that the new, replacement item is furnished. Claims for the replacement of oxygen equipment for the first month of use only are billed using the HCPCS code for the new equipment and either the RA or RP HCPCS modifier depending on the date that the equipment is furnished.

- You must include on the claim for the first month of use a narrative explanation of the reason why the equipment was replaced and supporting documentation must be maintained in your files. For example, if equipment is stolen, you should keep a copy of the police report in your files. For lost or irreparably damaged equipment, you should maintain any documentation that supports the narrative account of the incident. For reasonable useful lifetime replacements, the narrative explanation should include the date that the beneficiary received the equipment being replaced.

- When submitting claims electronically for replacement of oxygen equipment, you may use, for the narrative explanation, loop 2400 (line note), segment NTE02 (NTE01=ADD) of the ASC X12, version 4010A1 professional electronic claim format. If you are billing using the Form CMS-1500 paper claim, you may report this information in item 19 of the claim form.

- If you are a home health agency submitting claims electronically for replacement of oxygen equipment, you may use, for the narrative explanation, loop 2300, segment NTE (billing note) of the ASC X12, version 4010A1 institutional electronic claim format. If you are a home health agency billing using the UB-04 paper claim, you may report this information in Form Locator 80 (Remarks).

- A new certificate of medical necessity (CMN) is required in situations where oxygen equipment is replaced because the equipment has been in continuous use by the patient for the equipment’s reasonable useful lifetime or is lost, stolen, or irreparably damaged. New testing, however, is not required unless it is necessary in order to meet existing medical review guidelines for oxygen and oxygen equipment. You should continue to follow the existing guidelines requiring recertification CMNs for all situations in which oxygen equipment is being replaced. The most recent qualifying value and testing date should be entered on the CMN.

- As is the case for all DME items, you must maintain proof-of-delivery documentation in your files for replacement oxygen equipment. In addition, for equipment that is being replaced because it has been in continuous use by the beneficiary for the reasonable useful lifetime and the beneficiary has elected to obtain new equipment, you must also have proof-of-delivery documentation in your files for the item being replaced that documents that the oxygen equipment has been in use for at least 5 years.
Change in Oxygen Equipment during the Reasonable Useful Lifetime Period

- The reasonable useful lifetime for stationary or portable oxygen equipment begins when the oxygen equipment is first delivered to the beneficiary and continues until the point at which the stationary or portable oxygen equipment has been used by the beneficiary on a continuous basis for 5 years. Computation of the reasonable useful lifetime is not based on the age of the equipment.

- If there is a change in oxygen equipment modalities (e.g., from a concentrator to a stationary liquid oxygen system) prior to the end of the reasonable useful lifetime period, this does not result in the start of a new reasonable useful lifetime period or a new 36 month payment period. In addition, if you have to replace oxygen equipment that is not functioning properly prior to the end of the reasonable useful lifetime period, this does not result in the start of a new reasonable useful lifetime period or a new 36 month payment period. Finally, if the beneficiary switches to a new supplier and new equipment prior to the end of the reasonable useful lifetime period, this does not result in the start of a new reasonable useful lifetime period or a new 36 month payment period.

- A beneficiary may elect to obtain new oxygen equipment at the end of the 5 year reasonable useful lifetime period in these situations.

Clarification of Policy Regarding Continuous Use of Oxygen and Oxygen Equipment

- The instructions pertaining to payments for capped rental items during a period of continuous use now apply to the monthly payment amounts for oxygen and oxygen equipment and the portable oxygen equipment add-on payments.

- A period of continuous use allows for temporary interruptions in the use of the equipment. For breaks in need (beneficiary no longer needs or uses the equipment) of less than 60 days plus the days remaining in the last paid rental month, the period of continuous use does not start over and so the count of continuous months picks up where it left off before the break. For example, if the last paid rental month is month #31 and there is a 50 day break in need, the next paid rental month would be month #32.

- If, however, there is a break in need more than 60 days plus the days remaining in the last paid rental month, and the need for the equipment resumes at a later date, a new period of continuous use, a new 36-month payment period, and a new reasonable useful lifetime period would begin provided that you have submitted the following:
  - New medical necessity documentation (i.e., a new CMN and retesting) for oxygen and oxygen equipment and/or portable oxygen equipment;
  - A narrative explanation describing the reason for the interruption which shows that medical necessity in the prior episode ended. When submitting claims

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electronically for replacement of oxygen equipment, you may use, for the
narrative explanation, loop 2400 (line note), segment NTE02 (NTE01=ADD) of
the ASC X12, version 4010A1 professional electronic format. If you are billing
using the Form CMS-1500 paper claim, you may report this information in item
19 of the claim form. If you are a home health agency submitting claims
electronically for replacement of oxygen equipment, you may use, for the
narrative explanation, loop 2300, segment NTE (billing note) of the ASC X12,
version 4010A1 institutional electronic claim format. If you are a home health
agency and are billing using the UB-04 paper claim, you may report this
information in Form Locator 80 (Remarks). Suppliers and home health agencies
are not to use modifier RA on these claims.

PLEASE NOTE: If medical necessity for the equipment continues during a break in billing/Part
B payment (e.g., the beneficiary is hospitalized for 70 days but continues to use oxygen
equipment during the hospital stay), this DOES NOT constitute a break in need, and therefore, a
new period of continuous use DOES NOT begin. In these situations, the count of continuous
months picks up where it left off before the break.

OXYGEN CONTENTS

Payment for Oxygen Contents (General Policy)
• If you furnished liquid or gaseous oxygen equipment during the 36-month rental period,
you are responsible for furnishing the oxygen contents used with the oxygen equipment
for any period of medical need following the 36-month rental cap for the remainder of the
reasonable useful lifetime of the equipment.

• In these situations, you can bill for and receive a monthly payment for furnishing oxygen
contents (see chart below).

Payment for Oxygen Contents (When Monthly Payments May Begin)
• Payment for both oxygen contents used with stationary oxygen equipment and oxygen
contents used with portable oxygen equipment is included in the 36 monthly payments
for oxygen and oxygen equipment (stationary oxygen equipment payment) made for
codes E0424, E0439, E1390, or E1391. Beginning with dates of service on or after the
end date of service for the month representing the 36th payment for code E0424, E0439,
E1390, or E1391, you may bill on a monthly basis for furnishing oxygen contents
(stationary and/or portable), but only in accordance with the following chart:

<table>
<thead>
<tr>
<th>Equipment Furnished in Month 36</th>
<th>Monthly Contents Payment after Stationary Cap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oxygen Concentrator (E1390, E1391, or E1392)</td>
<td>None</td>
</tr>
<tr>
<td>Portable Gaseous Transfilling Equipment</td>
<td></td>
</tr>
</tbody>
</table>

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distributed, or copied to persons not authorized to receive the information.
Unauthorized disclosure may result in prosecution to the full extent of the law.
You may not bill for stationary oxygen contents if the beneficiary uses a stationary concentrator and you may not bill for portable oxygen contents if the beneficiary uses a portable concentrator or transfilling equipment.

PLEASE NOTE: The descriptors for HCPCS codes E0441 through E0444 reflect older policies and regulations and need to be revised to reflect current policies and regulations. For now, each of these four codes represents monthly delivery of either stationary or portable oxygen contents. The language in parentheses in the descriptors for each of these codes should be disregarded.

- If the beneficiary began using portable gaseous or liquid oxygen equipment (E0431 or E0434) more than one month after they began using stationary oxygen equipment, monthly payments for portable gaseous or liquid oxygen contents (E0443 or E0444) may begin following the stationary oxygen equipment payment cap AND prior to the end of the portable equipment payment cap (code E0431 or E0434). As long as the beneficiary is using covered gaseous or liquid portable oxygen equipment, payments for portable oxygen contents may begin following the stationary oxygen equipment payment cap. This will result in a period during which monthly payments for E0431 and E0443, in the case of a beneficiary using portable gaseous oxygen equipment, or E0434 and E0444, in the case of a beneficiary using portable liquid oxygen equipment, overlap. In these situations, after the 36-month portable oxygen equipment payment cap for E0431 or E0434 is reached, monthly payments for portable oxygen contents (E0443 or E0444) would continue.

- If the beneficiary began using portable gaseous or liquid oxygen equipment (E0431 or E0434) following the 36-month stationary oxygen equipment payment period, payments may be made for both the portable equipment (E0431 or E0434) and portable contents (E0443 or E0444).

- In all cases, separate payment for oxygen contents (stationary or portable) would end in the event that a beneficiary receives new stationary oxygen equipment and a new 36-month stationary oxygen equipment payment period begins (i.e., in situations where stationary oxygen equipment is replaced because the equipment has been in continuous use by the patient for the equipment’s reasonable useful lifetime or is lost, stolen, or irreparably damaged). Again, the monthly payment for stationary oxygen equipment includes payment for both stationary and portable oxygen contents. Therefore, under no
circumstances can you receive both the monthly stationary oxygen equipment payment and payment for either stationary or portable oxygen contents.

**Proof-of-Delivery Requirements for Oxygen Contents**

- Following the stationary oxygen equipment payment cap, you may bill for oxygen contents (stationary and/or portable in accordance with the chart above) on the anniversary date of the oxygen equipment billing.

For example, if the 36th month of continuous use of the stationary oxygen equipment begins on March 11th and ends on April 10th, you may begin billing for monthly oxygen contents that the beneficiary will use after the cap on April 11th.

- For subsequent months, you do not need to deliver the oxygen contents every month in order to continue billing for the contents on a monthly basis. A maximum of 3 months of oxygen contents can be delivered at one time. In these situations, the delivery date of the oxygen contents does not have to be the DOS (anniversary date) on the claim. However, in order to bill for contents for a specific month, you must have previously delivered quantities of oxygen that are sufficient to last for one month following the date of service on the claim. You are required to have proof-of-delivery for each actual delivery of oxygen, but as discussed above, this may be less often than monthly.

For example, if you deliver 30 oxygen tanks on April 11th and the beneficiary only uses 15 tanks from April 11th through May 10th and 15 tanks from May 11th through June 10th, you may bill for contents on April 11th and again on May 11th for contents delivered on April 11th that were used for two months.

A Change Request (CR) and a MLN Matters Article will be forthcoming that will incorporate the information contained in this listserv message.

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**Sent: 2/9/2009**

**Subject:** CMS Seeks Public Comment on Extending the Effective Date of the DMEPOS Competitive Bidding Interim Final Rule

On Friday, February 6, 2009, the Centers for Medicare & Medicaid Services (CMS) issued a notice seeking comment on a contemplated delay of 60 days in the effective date of the interim final rule entitled “Medicare Program; Changes to the Competitive Acquisition of Certain

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Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) by Certain Provisions of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA).” This notice is in accordance with the White House Chief of Staff’s memorandum of January 20, 2009 entitled “Regulatory Review.”

The interim final rule, published in the Federal Register on January 16, 2009, implements certain MIPPA provisions that (1) delay implementation of Round I of the competitive bidding program, (2) require CMS to conduct a second Round 1 competition in 2009, and (3) mandate certain changes for the Round 1 rebid and subsequent rounds of the program, including the development of a process for providing feedback to suppliers regarding missing financial documentation and the requirement that contractors disclose to CMS information regarding subcontracting relationships.

Since the effective date of the interim final rule is February 17, the comment period initiated by this notice is abbreviated; comments must be received on or before February 12, 2009. To view the notice, please visit http://www.federalregister.gov/OFRUpload/OFRData/2009-02839_PI.pdf

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**Sent: 2/13/2009**

**Subject:** Medicare DMEPOS Competitive Bidding Program Announcements

The Centers for Medicare & Medicaid Services has delayed the effective date for the Interim Final Rule with Comment Period that implements certain provisions of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) for the Round 1 Rebid of the Medicare Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Acquisition Program. The effective date was originally February 17, 2009 and is now April 18, 2009.

The original comment period on the Interim Final Rule remains unchanged. The public has until March 17, 2009, to submit comments on the substantive policy issues discussed in the rule.

Visit the CMS web site at http://www.cms.hhs.gov/DMEPOSCompetitiveBid/ to view additional information.

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**Sent: 4/17/2009**

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STATEMENT ON THE DMEPOS COMPETITIVE BIDDING PROGRAM
CENTERS FOR MEDICARE & MEDICAID SERVICES

The Medicare Improvements for Patients and Providers Act of 2008 (MIPPA), enacted on July 15, 2008, made limited changes to the competitive bidding program for Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS), including a requirement that the Secretary conduct a second competition to select suppliers for Round 1 in 2009. The Centers for Medicare & Medicaid Services (CMS) issued an interim final rule with comment period (IFC) on January 16, 2009. The rule incorporates into existing regulations specific statutory requirements contained in MIPPA related to the competitive bidding program.

The Administration delayed the effective date for the IFC to allow CMS officials the opportunity for further review of the issues of law and policy raised by the rule. Based upon its review and on the need to ensure that CMS is able to meet the statutory deadlines contained in MIPPA, the Administration has concluded that the effective date should not be further delayed. The rule will become effective tomorrow, April 18, 2009. However, there will be no immediate effect on the Medicare DMEPOS benefit and Medicare beneficiaries may continue to use their current DMEPOS suppliers at this time.

During the comment period, CMS received many suggestions by a range of stakeholders to make further improvements to the competitive bidding program, such as ensuring that CMS’s processes for collecting and evaluating bids are fair and transparent. In the upcoming weeks, CMS will be issuing further guidance on the timeline for and bidding requirements related to the Round 1 re-bid. In finalizing these guidelines, CMS will continue to seek input from all affected stakeholders to ensure program implementation consistent with the legislative requirements.

Sent: 5/08/2009

Subject: PAOC Meeting on the Implementation of the Medicare DMEPOS Competitive Bidding Program

PROGRAM ADVISORY and OVERSIGHT COMMITTEE (PAOC) MEETING ON THE IMPLEMENTATION OF THE MEDICARE DURABLE MEDICAL EQUIPMENT, PROSTHETICS, ORTHOTICS, and SUPPLIES (DMEPOS) COMPETITIVE BIDDING PROGRAM

June 4, 2009
8:30 A.M. - 5:00 P.M. (Eastern Daylight Time)
The Centers for Medicare & Medicaid Services (CMS) will be hosting a meeting with the Program Advisory and Oversight Committee (PAOC) on June 4, 2009 to discuss the Round 1 Rebid of the Medicare DMEPOS Competitive Bidding Program. The agenda will focus on legislative changes mandated by the Medicare Improvements for Patients and Providers Act of 2008 as well as additional process improvements. CMS expects that the feedback received from the PAOC committee members and the public will assist the Agency as it moves forward with the Round 1 Rebid.

We look forward to your input and participation.

To register for the meeting, please visit:  http://www2.blsdev.com/blsmeetings/h1565/

For additional information about the Medicare DMEPOS Competitive Bidding, please visit the CMS web site at: http://www.cms.hhs.gov/DMEPOSCompetitiveBid/01_overview.asp#TopOfPage

Subject: Final Agenda for the Next Meeting of the Program Advisory and Oversight Committee (PAOC)

The Centers for Medicare & Medicaid Services (CMS) has finalized the agenda (below) for the next meeting of the Program Advisory and Oversight Committee (PAOC) which advises the agency on implementation of the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) competitive bidding program and DMEPOS supplier quality standards. Jon Blum, CMS, and Tom Jeffers, Hill Rom Inc., are co-chairs for the committee.

Program Advisory and Oversight Committee (PAOC)
Meeting Agenda, Thursday, June 04, 2009, Marriott Hotel BWI

8:00 – 8:30 a.m. Public Registration
8:30 – 8:45 a.m. Opening Remarks
8:45 – 9:00 a.m. Introduction of New PAOC Committee
9:00 – 10:00 a.m. Background on the Program

- Standard Payment Rules
- Competitive Bidding Demonstrations
- Medicare Modernization Act of 2003
- 2008 Legislative Refinements
10:00 – 10:30 a.m. On-Line Bidding System
10:30 – 10:45 a.m.                 Mid-Morning Break
10:45 – 11:30 a.m.                 Education on Program Requirements and Bidder Responsibilities
11:30 – 12:00 p.m.                 Financial Documentation
12:00 – 1:30 p.m.                 LUNCH (On your own)
1:30 – 2:30 p.m.                 Licensure, Accreditation, and Subcontracting Requirements
2:30 – 3:15 p.m.                 New Supplier Issues
3:15 – 3:30 p.m.                 Mid-Afternoon Break
3:30 – 4:00 p.m.                 Mail Order - Diabetic Testing Supplies
4:00 – 4:15 p.m.                 Tentative Timeline
4:15 – 5:00 p.m.                 Public Comments

Sent: 5/29/2009
Subject: GET READY FOR COMPETITIVE BIDDING!

The Medicare Improvements for Patients and Providers Act of 2008 (MIPPA), enacted on July 15, 2008, made limited changes to the Medicare Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Bidding Program, including a requirement that competition to re-bid Round 1 occur in 2009. On January 16, 2009, the Centers for Medicare & Medicaid Services (CMS) issued an interim final rule with comment period that incorporates into regulations only those provisions of MIPPA related to the DMEPOS competitive bidding program that are self-implementing and necessary to conduct the Round 1 rebid competition in 2009. That rule became effective on April 18, 2009. To ensure that suppliers have ample time to prepare for the competition, CMS has announced the following next steps for the program:

SPRING 2009
• CMS BEGINS PRE-BIDDING SUPPLIER AWARENESS CAMPAIGN
• PROGRAM ADVISORY AND OVERSIGHT COMMITTEE (PAOC) MEETING (JUNE 4, 2009)

SUMMER 2009
• CMS ANNOUNCES BIDDING SCHEDULE/SCHEDULE OF EDUCATION EVENTS
• CMS BEGINS BIDDER EDUCATION CAMPAIGN
• BIDDER REGISTRATION PERIOD TO OBTAIN USER IDS AND PASSWORDS BEGINS

FALL 2009
• BIDDING BEGINS

If you are a supplier interested in bidding, prepare now – don’t wait!

**UPDATE YOUR NSC FILES:** DMEPOS supplier standard # 2 requires ALL suppliers to notify the National Supplier Clearinghouse (NSC) of any change to the information provided on the Medicare enrollment application (CMS-855S) within 30 days of the change. DMEPOS suppliers should use the 3/09 version of the CMS-855S and should review and update:

- The list of products and services found in section 2.D;
- The Authorized Official(s) information in sections 6A and 15; and
- The correspondence address in section 2A2 of the CMS-855S.

This is especially important for suppliers who will be involved in the Medicare DMEPOS Competitive Bidding Program. These suppliers must ensure the information listed on their supplier files is accurate to enable participation in this program. Information and instructions on how to submit a change of information may be found on the NSC Web site (http://www.palmettogba.com/nsc) and by following this path: Supplier Enrollment/Change of Information/Change of Information Guide.

**GET LICENSED:** Suppliers submitting a bid for a product category in a competitive bidding area (CBA) must meet all DMEPOS state licensure requirements and other applicable state licensure requirements, if any, for that product category for every state in that CBA. Prior to submitting a bid for a CBA and product category, the supplier must have a copy of the applicable state licenses on file with the NSC. As part of the bid evaluation we will verify with the NSC that the supplier has on file a copy of all applicable required state license(s).

**GET ACCREDITED:** CMS would like to remind DMEPOS suppliers again that time is running out to obtain accreditation by the September 30, 2009 deadline or risk having their Medicare Part B billing privileges revoked on October 1, 2009. Accreditation takes an average of 6 months to complete. It is very important for DMEPOS suppliers to contact an accreditation organization right away to obtain information about the accreditation process and submit an application. Suppliers must be accredited for a product category in order to submit a bid for that product category. CMS cannot contract with suppliers that are not accredited by a CMS-approved accreditation organization.

Further information on the DMEPOS accreditation requirements along with a list of the accreditation organizations and those professionals and other persons exempted from accreditation may be found at the CMS website: [http://www.cms.hhs.gov/MedicareProviderSupEnroll/01_Overview.asp](http://www.cms.hhs.gov/MedicareProviderSupEnroll/01_Overview.asp).
GET BONDED: CMS would like to remind DMEPOS suppliers that certain suppliers will need to obtain and submit a surety bond by the October 2, 2009 deadline or risk having their Medicare Part B billing privileges revoked. Suppliers subject to the bonding requirement must be bonded in order to bid in the DMEPOS competitive bidding program. A list of sureties from which a bond can be secured is found at the Department of the Treasury’s “List of Certified (Surety Bond) Companies;” the web site is located at: http://www.fms.treas.gov/c570/c570_a-z.html.

Visit the CMS web site at http://www.cms.hhs.gov/DMEPOSCompetitiveBid/ for the latest information on the DMEPOS competitive bidding program.


Sent: 6/5/2009
Subject: GET READY FOR DMEPOS COMPETITIVE BIDDING!

The Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) competitive bidding program Round 1 Rebid is coming soon!!

Summer 2009
• CMS announces bidding schedule/schedule of education events
• CMS begins bidder education campaign
• Bidder registration period to obtain user ID and passwords begins

Fall 2009
• Bidding begins

If you are a supplier interested in bidding, prepare now – don’t wait!

UPDATE YOUR NSC FILES: DMEPOS supplier standard # 2 requires ALL suppliers to notify the National Supplier Clearinghouse (NSC) of any change to the information provided on the Medicare enrollment application (CMS-855S) within 30 days of the change. DMEPOS suppliers should use the 3/09 version of the CMS-855S and should review and update:
• The list of products and services found in section 2.D;
• The Authorized Official(s) information in sections 6A and 15; and
• The correspondence address in section 2A2 of the CMS-855S.

This is especially important for suppliers who will be involved in the Medicare DMEPOS Competitive Bidding Program. These suppliers must ensure the information listed on their supplier files is accurate to enable participation in this program. Information and instructions on how to submit a change of information may be found on the NSC Web
site (http://www.palmettogba.com/nsc) and by following this path: Supplier Enrollment/Change of Information/Change of Information Guide.

**GET LICENSED:** Suppliers submitting a bid for a product category in a competitive bidding area (CBA) must meet all DMEPOS state licensure requirements and other applicable state licensure requirements, if any, for that product category for every state in that CBA. Prior to submitting a bid for a CBA and product category, the supplier must have a copy of the applicable state licenses on file with the NSC. As part of the bid evaluation we will verify with the NSC that the supplier has on file a copy of all applicable required state license(s).

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Further information on the DMEPOS accreditation requirements along with a list of the accreditation organizations and those professionals and other persons exempted from accreditation may be found at the CMS website: [http://www.cms.hhs.gov/MedicareProviderSupEnroll/01_Overview.asp](http://www.cms.hhs.gov/MedicareProviderSupEnroll/01_Overview.asp).

**GET BONDED:** CMS would like to remind DMEPOS suppliers that certain suppliers will need to obtain and submit a surety bond by the October 2, 2009 deadline or risk having their Medicare Part B billing privileges revoked. Suppliers subject to the bonding requirement must be bonded in order to bid in the DMEPOS competitive bidding program. A list of sureties from which a bond can be secured is found at the Department of the Treasury’s “List of Certified (Surety Bond) Companies;” the web site is located at: [http://www.fms.treas.gov/c570/c570_a-z.html](http://www.fms.treas.gov/c570/c570_a-z.html).


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Subject: Get Ready for DMEPOS Competitive Bidding!

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Visit the CMS website at http://www.cms.hhs.gov/DMEPOSCompetitiveBid/ for the latest information on the DMEPOS competitive bidding program.

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**Sent: 7/1/2009**

Subject: Proposed DMEPOS Regulatory Updates

The Centers for Medicare & Medicaid Services (CMS) has announced limited proposed regulatory provisions for the Medicare durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program. These proposals include a proposed administrative process for contract suppliers whose contracts were terminated by the Medicare Improvements for Patients and Providers Act of 2008 to submit claims for any applicable damages and proposed grandfathering provision updates. These proposed provisions are found in Section O of the Physician Fee Schedule and Other Revisions to Part B regulation (CMS-1413-P), which is now on display at the Office of the Federal Register.

Visit the CMS website at http://www.cms.hhs.gov/center/dme.asp to view the rule and obtain additional information.

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**Sent: 7/2/2009**

Subject: Get Ready for DMEPOS Competitive Bidding!

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Further information on the DMEPOS accreditation requirements along with a list of the accreditation organizations and those professionals and other persons exempted from...
DMEPOS Supplier Accreditation and Surety Bond Requirement Deadlines Coming In October

Suppliers May Choose to Voluntarily Terminate Enrollment If They Do Not Plan To Comply

Medicare suppliers of durable medical equipment, prosthetics, orthotics and supplies (DMEPOS), unless exempt, must be accredited and obtain a surety bond by October 1, 2009 and October 2, 2009, respectively.

If you have made the decision not to obtain accreditation or a surety bond when required, you may want to voluntarily terminate your enrollment in the Medicare program before the implementation dates above. You can voluntarily terminate your enrollment with the Medicare program by completing the sections associated with voluntary termination on page 4 of the Medicare enrollment application (CMS-855S). Once complete, you should sign, date and send the completed application to the National Supplier Clearinghouse (NSC). By voluntarily terminating your Medicare enrollment, you will preserve your right to re-enroll in Medicare once you meet the requirements to participate in the Medicare program.

If you do not comply with the accreditation and surety bond requirements and do not submit a voluntary termination, your Medicare billing privileges will be revoked. A revocation will bar you from re-enrolling in Medicare for at least one year after the date of revocation.
Suppliers who do not plan to stay enrolled in Medicare are strongly encouraged to notify their beneficiaries as soon as possible so the beneficiary can find another supplier.

For additional information regarding DMEPOS accreditation or the provisions associated with a surety bond, go to http://www.cms.hhs.gov/MedicareProviderSupEnroll. Frequently Asked Questions (FAQs) on the surety bond requirement can be found on the NSC’s FAQ page at http://www.palmettogba.com/nsc.

Sent: 7/16/2009

CMS Webinar for DMEPOS Referral Agents: The Medicare DMEPOS Competitive Bidding Program Round I Rebid is Coming Soon!!

CMS Acting Administrator Charlene Frizzera invites you to a special Webinar with the Centers for Medicare & Medicaid Services on the Competitive Bidding Round I Rebid for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)

The Medicare DMEPOS Competitive Bidding Program Round I Rebid Is Coming Soon!!

Medicare's DMEPOS competitive bidding program will change the way some beneficiaries obtain certain medical equipment and supplies.

An educational Webinar for DMEPOS referral agents (beneficiary advocacy groups and prescribers) will be held on July 20, 2009. Participants will have the opportunity to ask questions of CMS policy experts.

July 20, 2009

2 p.m., eastern time

Click here to register for the CMS Webinar:
http://www.fedmeetings.net/common/registration.cfm?mid=2497

Additional details regarding the Webinar (including log-in, dial-in, and access codes) will be forwarded via e-mail at a later date.

Subject: Two DMEPOS Message Reminders

The Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) competitive bidding program Round 1 Rebid is coming soon!!

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INFORMATION NOT RELEASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW:
This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.
submit a bid for that product category. CMS cannot contract with suppliers that are not accredited by a CMS-approved accreditation organization.

Further information on the DMEPOS accreditation requirements along with a list of the accreditation organizations and those professionals and other persons exempted from accreditation may be found at the CMS website: http://www.cms.hhs.gov/MedicareProviderSupEnroll/01_Overview.asp.

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Visit the CMS website at http://www.cms.hhs.gov/DMEPOSCompetitiveBid/ for the latest information on the DMEPOS competitive bidding program.

DMCPOS Supplier Accreditation and Surety Bond Requirement Deadlines Coming In October

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Sent: 7/30/2009
Subject: Three DMEPOS Message Reminders

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### Take Action Now to Prepare for the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program!


The article highlights specific sections of the CMS-855S, Medicare Enrollment Application, where the accuracy of the Authorized Official information and correspondence mailing address are critical for successful bidder registration. The Centers for Medicare & Medicaid Services (CMS) urges suppliers planning to bid in the 2009 bidding cycle to read this article and make sure their most recent CMS-855S submission is still current and accurate.

**Sent: Mon 8/3/2009**

**Subject: MEDICARE ANNOUNCES TIMELINE FOR BIDDING/ BEGINS SUPPLIER EDUCATION CAMPAIGN FOR DMEPOS COMPETITIVE BIDDING PROGRAM**

**BIDDING TIMELINE FOR THE DMEPOS COMPETITIVE BIDDING PROGRAM**

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*INFORMATION NOT RELEASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW:*

This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.
The Centers for Medicare & Medicaid Services (CMS) has announced the bidding timeline for the Round 1 Rebid of the Medicare durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program. To view the timeline, please click: http://www.dmecompetitivebid.com/.

BIDDER EDUCATION CAMPAIGN
CMS is launching an intensive bidder education campaign designed to ensure that DMEPOS suppliers interested in bidding get all the information they need to submit a complete bid in a timely manner. CMS will focus initially on preparing suppliers for the registration period. As suppliers get registered for the competitive bidding process, CMS education and outreach efforts will intensify with particular focus on information specific to registered bidders and the bidding process.

CMS’s Competitive Bidding Implementation Contractor (CBIC) will be the focal point for bidder education. The CBIC has a dedicated Web site, http://www.dmecompetitivebid.com/, which will include a comprehensive array of important information for suppliers, including bidding rules, user guides, frequently asked questions, policy fact sheets, checklists, and bidding information charts. The CBIC toll-free help desk, 1-877-577-5331, is now open to help bidders with all of their questions and concerns. All suppliers interested in bidding are urged to visit the CBIC Web site to sign up for e-mail updates.

Visit the CMS Web site at http://www.cms.hhs.gov/DMEPOSCompetitiveBid/ for the latest information on the DMEPOS competitive bidding program.

with a step-by-step explanation of the registration process. In addition, we will identify common registration issues from the original Round 1 of the DMEPOS competitive bidding program and discuss refinements to the bidding system.

Reminder: It’s important for suppliers to register early to avoid delays in accessing the online bidding system when bidding opens.

Background:
The Medicare DMEPOS competitive bidding program was established by Congress in the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 and later amended by the Medicare Improvements for Patients and Providers Act of 2008. These statutes require the implementation of a competitive bidding program that replaces Medicare’s current fee schedule methodology for determining payment rates for certain DMEPOS items in competitive bidding areas (CBAs). These payment rates for DMEPOS competitively bid items are determined by using bids submitted by DMEPOS suppliers.

On August 3, 2009, the Centers for Medicare & Medicaid Service (CMS) issued the bidding timeline for the Round 1 Rebid of the DMEPOS competitive bidding program and initiated a comprehensive bidder education campaign. CMS’ Competitive Bidding Implementation Contractor (CBIC) will be the focal point for bidder education. The CBIC's dedicated website, http://www.dmecompetitivebid.com/, will include a comprehensive array of important information for suppliers, including bidding rules, user guides, frequently asked questions, policy fact sheets, checklists, and bidding information charts. The CBIC toll-free help desk, 1-877-577-5331, is now open to help bidders with all of their questions and concerns. All suppliers interested in bidding are urged to sign up for E-mail Updates on the home page of the CBIC website.

We look forward to your participation.

Special Open Door Participation Instructions:
Dial: 1-800-837-1935 & Reference Conference ID: 23038688
Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp and will be accessible for downloading beginning Thursday, August 27, 2009.

For Open Door Forum schedule updates, E-Mailing list subscriptions, and to view Frequently Asked Questions please visit our website at http://www.cms.hhs.gov/opendoorforums/.
Thank you for your interest in CMS Open Door Forums.

Sent: 8/10/2009
Subject: Medicare Provider Enrollment Reminder for Suppliers of Durable Medical Equipment, Prosthetics, Orthotics and Supplies
MEDICARE PROVIDER ENROLLMENT REMINDER
FOR SUPPLIERS OF
DURABLE MEDICAL EQUIPMENT, PROSTHETICS, ORTHOTICS AND SUPPLIES

With the implementation of the surety bond requirements for certain suppliers of durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) in October 2009, the Centers for Medicare & Medicaid Services (CMS) reminds DMEPOS suppliers that each practice location of a DMEPOS supplier must be enrolled in the Medicare program. Each practice location of a DMEPOS supplier is required by Medicare regulations to be uniquely identified; as a result, each practice location must have its own unique National Provider Identifier (NPI) and its own Medicare-assigned Provider Transaction Access Number (PTAN). With the exception described below in the IMPORTANT NOTE, there should be a 1-to-1 relationship between a DMEPOS supplier’s NPI and its PTAN. The PTAN is assigned to a DMEPOS supplier by the National Supplier Clearinghouse (NSC) upon its enrollment in the Medicare program. (The PTAN has previously been referred to as the NSC Number.)

IMPORTANT NOTE: DMEPOS suppliers who are sole proprietorship business structures with more than one practice location must ensure that each location is enrolled in Medicare. Each practice location would be assigned a PTAN upon its enrollment. However, as a sole proprietorship, the business is legally one and the same as the person who is the sole proprietor and, therefore, like any individual, is eligible for only a single NPI.

Sent: 8/10/2009, 8/13/2009
Subject: Four DMEPOS Message Reminders

The Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)
Competitive Bidding Program Round 1 Rebid is Coming Soon!!

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http://www.cms.hhs.gov/MedicareProviderSupEnroll/01_Overview.asp

GET BONDED: CMS would like to remind DMEPOS suppliers that certain suppliers will need to obtain and submit a surety bond by the October 2, 2009 deadline or risk having their Medicare Part B billing privileges revoked. Suppliers subject to the bonding requirement must be bonded in order to bid in the DMEPOS competitive bidding program. A list of sureties from which a bond can be secured is found at the Department of the Treasury’s “List of Certified (Surety Bond) Companies;” the web site is located at:
http://www.fms.treas.gov/c570/c570_a-z.html.
Visit the CMS website at http://www.cms.hhs.gov/DMEPOSCOMPETITIVEBID/ for the latest information on the DMEPOS competitive bidding program.

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**DMEPOS Supplier Accreditation and Surety Bond Requirement Deadlines Coming In October**

Suppliers May Choose to Voluntarily Terminate Enrollment If They Do Not Plan To Comply

Medicare suppliers of durable medical equipment, prosthetics, orthotics and supplies (DMEPOS), unless exempt, must be accredited and obtain a surety bond by October 1, 2009 and October 2, 2009, respectively.

If you have made the decision not to obtain accreditation or a surety bond when required, you may want to voluntarily terminate your enrollment in the Medicare program before the implementation dates above. You can voluntary terminate your enrollment with the Medicare program by completing the sections associated with voluntary termination on page 4 of the Medicare enrollment application (CMS-855S). Once complete, you should sign, date and send the completed application to the National Supplier Clearinghouse (NSC). By voluntarily terminating your Medicare enrollment, you will preserve your right to re-enroll in Medicare once you meet the requirements to participate in the Medicare program.

If you do not comply with the accreditation and surety bond requirements and do not submit a voluntary termination, your Medicare billing privileges will be revoked. A revocation will bar you from re-enrolling in Medicare for at least one year after the date of revocation.

Suppliers who do not plan to stay enrolled in Medicare are strongly encouraged to notify their beneficiaries as soon as possible so the beneficiary can find another supplier.

For additional information regarding DMEPOS accreditation or the provisions associated with a surety bond, go to http://www.cms.hhs.gov/MedicareProviderSupEnroll. Frequently Asked Questions (FAQs) on the surety bond requirement can be found on the NSC’s FAQ page at http://www.palmettogba.com/nsC.

# # # # #

**Take Action Now to Prepare for the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program!**

# # # # #

Also recently released--MM6571 - Program Instructions Designating the Competitive Bidding Areas and Product Categories Included in the Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Bidding Program Round One Rebid in calendar year (CY) 2009. This article identifies the nine metropolitan statistical areas (MSAs) as well as product categories in which the DMEPOS competitive bidding round one re-bid will occur in CY 2009 under section 1847 of the Social Security Act. You can view this article at [http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6571.pdf](http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6571.pdf).

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**Sent: 8/17/2009**

Subject: Registration is Now Open for Suppliers Interested in Competitive Bidding for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)

REGISTRATION IS NOW OPEN FOR SUPPLIERS INTERESTED IN COMPETITIVE BIDDING FOR DMEPOS

Registration is now open and available to all suppliers interested in participating in the Round 1 Rebid of the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program. Interested suppliers will submit their bids using an on-line internet application. To help ensure bid security and privacy, suppliers must first register to obtain a user ID and password. Only suppliers that have a user ID and password will be able to use the on-line bidding system; suppliers that do not register will not be able to bid.

If you are a supplier interested in bidding, register now – don’t wait. Designate one Authorized Official (AO) listed on the CMS-855S enrollment form to act as your AO for registration purposes. The AO must register first and must approve other supplier employee requests to register. The AO’s user ID and password will be sent by mail and should be delivered within 10 days after successful registration. After an AO successfully registers, the AO may designate other supplier employees to serve as Backup Authorized Officials (BAO) and/or End Users (EU). BAOS and EUs must also register in order to be able to use the on-line bidding system. The legal name, date of birth, and Social Security number (SSN) of the AO and BAOS must match exactly with what is on file with the National Supplier Clearinghouse in order to register successfully. Legal names, dates of birth, and SSNs of all users must match what is on file with the Social Security Administration.
We strongly urge all AOs to register no later than September 14, 2009 to ensure that BAOs and EUs have time to register before bidding begins. We recommend that BAOs register no later than October 9, 2009 so that they will be able to assist AOs with approving EU registration. Registration will close on November 4, 2009 at 9:00 p.m. EST – no AOs, BAOs, or EUs can register after registration closes.

To register, go to the Competitive Bidding Implementation Contractor (CBIC) website at http://www.dmecompetitivebid.com/. Please review the IACS Reference Guide for step-by-step instructions on registration. The CBIC web site also has the following useful tools: a registration checklist; Quick Step guides; and frequently asked questions. All suppliers interested in bidding are urged to sign up for E-mail Updates on the home page of the CBIC website.

We would like to remind all suppliers interested in bidding that we will be holding the first in a series of eight Special Open Door Forum (ODF) bidders’ conferences for the Round 1 Rebid of the DMEPOS Competitive Bidding Program on August 19, 2009 from 2:00 to 3:00 pm EDT. At this Special ODF, we will provide an overview of what to expect during the bidder education period and provide suppliers with a step-by-step explanation of the registration process. In addition, we will identify common registration issues from the original Round 1 of the DMEPOS Competitive Bidding Program and discuss refinements to the bidding system. The PowerPoint presentation for the conference, along with information on how to participate, can be found on the CBIC website.

If you have any questions about the registration process, please contact the CBIC Customer Service Center at 1-877-577-5331. For information about the competitive bidding areas and product categories included in the Round 1 Rebid, as well as bidder education materials, please visit the CBIC website at http://www.dmecompetitivebid.com/.

Sent: 8/18/2009
Subject: Reminder - Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders’ Conference--How to Register to Access the Bidding System

Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders’ Conference--How to Register to Access the Bidding System – August 19, 2009

REMINDER: The first in a series of Special Open Door Forum (ODF) bidders' conferences for the durable medical equipment, prosthetics, orthotics, and supplies competitive bidding program will be held on August 19, 2009, from 2:00pm -3:00pm EDT. At this Special ODF, we will provide an overview of what to expect during the bidder education period and provide suppliers with a step-by-step explanation of the registration process. In addition, we will identify common
registration issues from the original Round 1 of the DMEPOS competitive bidding program and discuss refinements to the bidding system.

The PowerPoint presentation for this Special ODF is now available on the Competitive Bidding Implementation Contractor (CBIC) web site. We encourage those who will be participating to print out the PowerPoint presentation before the Special ODF. For more information on this presentation and other educational activities, please visit the CBIC web site, http://www.dmecompetitivebid.com/

Special Open Door Participation Instructions:
Dial: 1-800-837-1935 & Reference Conference ID: 23038688
Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp and will be accessible for downloading beginning Thursday, August 27, 2009.

For Open Door Forum schedule updates, E-Mailing list subscriptions, and to view Frequently Asked Questions please visit our website at http://www.cms.hhs.gov/opendoorforums/.

Thank you for your interest in CMS Open Door Forums.

Sent: 8/20/2009, 8/21/2009
Subject: Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program Bidders’ Conference - Learn the Rules to Submit a Bid Successfully

Centers for Medicare & Medicaid Services Special Open Door Forum:
Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program Bidders’ Conference-
Learn the Rules to Submit a Bid Successfully

Wednesday, September 2, 2009
2:00 pm-3:00 pm Eastern Time
Conference Call Only

Please join us for the second in a series of eight Special Open Door Forum (ODF) bidders’ conferences for the Round 1 Rebid of the Medicare durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program. At this Special ODF, we will provide an overview of the competitive bidding areas (CBAs), product categories, and important rules to remember when submitting your bid(s). In addition, we will discuss eligibility requirements such as supplier standards, subcontracting, licensure, bonding, and accreditation.
We will also provide an overview of special rules for physicians and treating practitioners, skilled nursing facilities, and hospitals.

**Reminder:** Registration for user IDs and passwords is open. It’s important for suppliers to register early to avoid delays in accessing the online bidding system when bidding opens.

**Background:**
On August 3, 2009, the Centers for Medicare & Medicaid Service (CMS) issued the bidding timeline for the Round 1 Rebid of the DMEPOS competitive bidding program and initiated a comprehensive bidder education campaign. CMS’ Competitive Bidding Implementation Contractor (CBIC) is the focal point for bidder education. Please visit the CBIC’s dedicated website, [http://www.dmecompetitivebid.com](http://www.dmecompetitivebid.com) for important information, including bidding rules, user guides, frequently asked questions, policy fact sheets, checklists, and bidding information charts. The CBIC toll-free help desk, 1-877-577-5331, is open to help bidders with all of their questions and concerns. All suppliers interested in bidding are urged to sign up for e-mail updates on the home page of the CBIC website.

We look forward to your participation.

**Special Open Door Participation Instructions:**
Dial: 1-800-837-1935 & Reference Conference ID: 23044340

Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at [http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp](http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp) and will be accessible for downloading beginning Friday, September 11, 2009.


Thank you for your interest in CMS Open Door Forums.

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**Sent: 8/27/2009**
**Subject: Registration System and Help Desk Closed Labor Day Weekend**

The CMS registration system for the DMEPOS Competitive Bidding Program will be unavailable due to routine maintenance from Friday, September 4, at 9 p.m. Eastern Time until Tuesday, September 8, at 9 a.m. Eastern Time. The Competitive Bidding Implementation Contractor (CBIC) toll-free help desk will close for the Labor Day holiday on Friday, September 4.
4, at 9 p.m. Eastern Time and will reopen on Tuesday, September 8, at 9 a.m. Eastern Time. The CBIC website, [http://www.dmecompetitivebid.com/](http://www.dmecompetitivebid.com/), and the Interactive Voice Response (IVR) unit will be available for registration and bidding information.

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**Sent: 8/28/2009**

**Subject:** Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders' Conference—Rules for Submitting a Bid

REMINDER: The second in a series of Special Open Door Forums (ODF), which serve as bidders' conferences, to provide information on the durable medical equipment, prosthetics, orthotics, and supplies competitive bidding program will be held on September 2, 2009, from 2:00pm - 3:00pm EDT. At this Special ODF, we will provide an overview of the competitive bidding areas (CBAs), product categories, and important rules to remember when submitting your bid(s). In addition, we will discuss eligibility requirements such as meeting supplier standards, subcontracting, licensure, bonding, and accreditation. We will also provide an overview of special rules for physicians and treating practitioners, skilled nursing facilities, and hospitals.

The PowerPoint presentation for this Special ODF is now available on the Competitive Bidding Implementation Contractor (CBIC) web site. We encourage those who will be participating to print out the PowerPoint presentation before the Special ODF. For more information on this presentation and other educational activities, please visit the CBIC web site, [http://www.dmecompetitivebid.com/](http://www.dmecompetitivebid.com/).

Special Open Door Participation Instructions:

Dial: 1-800-837-1935 & Reference Conference ID: 23044340

Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at [http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp](http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp) and will be accessible for downloading beginning Friday, September 11, 2009.


Thank you for your interest in CMS Open Door Forums.
**Sent: 9/2/2009**
**Subject: Reminder: Registration System and Help Desk Closed Labor Day Weekend**

This is a reminder that the CMS registration system for the DMEPOS Competitive Bidding Program will be unavailable due to routine maintenance from Friday, September 4, at 9 p.m. Eastern Time until Tuesday, September 8, at 9 a.m. Eastern Time. The Competitive Bidding Implementation Contractor (CBIC) toll-free help desk will close for the Labor Day holiday on Friday, September 4, at 9 p.m. Eastern Time and will reopen on Tuesday, September 8, at 9 a.m. Eastern Time. The CBIC website, [http://www.dmecompetitivebid.com/](http://www.dmecompetitivebid.com/), and the Interactive Voice Response (IVR) unit will be available for registration and bidding information.

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**Sent: 9/8/2009**
**Subject: Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders’ Conference: What You Need to Know Before Submitting Your Bid**

Centers for Medicare & Medicaid Services  
Special Open Door Forum:  
Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)  
Competitive Bidding Program Bidders’ Conference:  
What You Need to Know Before Submitting Your Bid  

Wednesday, September 16, 2009  
3:30 pm-4:30 pm Eastern Time  
Conference Call Only

Please join us for the third in a series of eight Special Open Door Forum (ODF) bidders’ conferences for the Round 1 Rebid of the Medicare durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program. At this Special ODF, we will provide an overview of the policies for change of ownership, grandfathering, and traveling beneficiaries. In addition, we will discuss key contract supplier responsibilities required under the terms of the DMEPOS competitive bidding program supplier contract.

**Reminder:** Registration for user IDs and passwords is open. It’s important for suppliers to register early to avoid delays in accessing the online bidding system when bidding opens.

**Background:**

On August 3, 2009, the Centers for Medicare & Medicaid Service (CMS) issued the bidding timeline for the Round 1 Rebid of the DMEPOS competitive bidding program and initiated a comprehensive bidder education campaign. CMS’ Competitive Bidding Implementation
Contractor (CBIC) is the focal point for bidder education. Please visit the CBIC’s dedicated website, http://www.dmecompetitivebid.com/, for important information, including bidding rules, user guides, frequently asked questions, policy fact sheets, checklists, and bidding information charts. The CBIC toll-free help desk, 1-877-577-5331, is open to help bidders with all of their questions and concerns. All suppliers interested in bidding are urged to sign up for e-mail updates on the home page of the CBIC website.

We look forward to your participation.

Special Open Door Participation Instructions:
Dial: 1-800-837-1935 & Reference Conference ID: 23044660
Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp and will be accessible for downloading beginning Thursday, September 24, 2009.

For Open Door Forum schedule updates, E-Mailing list subscriptions, and to view Frequently Asked Questions please visit our website at http://www.cms.hhs.gov/opendoorforums/.

Thank you for your interest in CMS Open Door Forums.

Sent: 9/11/2009
Subject: DMEPOS COMPETITIVE BIDDING- DEADLINE AND IMPORTANT REMINDERS from the Centers for Medicare & Medicaid Services

DMEPOS COMPETITIVE BIDDING- DEADLINE AND IMPORTANT REMINDERS

We would like to remind all suppliers interested in participating in the Round 1 Rebid of the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) competitive bidding program that registration for user IDs and passwords is open. If you are interested in bidding you must designate one Authorized Official (AO) from those listed on the CMS-855S enrollment form to act as your AO for registration purposes, and that AO must register. We strongly urge all AOs to register no later than September 14, 2009 to ensure that AOs have time to designate other supplier employees to use the on-line bidding system. Suppliers that do not register will not be able to bid when bidding opens.

AOs who successfully register should receive their user IDs and passwords in the mail within 10 days after successful registration. After an AO successfully registers and receives his or her user ID and password, the AO may designate other supplier employees to serve as Backup Authorized Officials (BAO) and/or End Users (EU). BAOs and EUs must also register in order
to be able to use the on-line bidding system. The legal name, date of birth, and Social Security number (SSN) of the AO and BAOs must match what is on file with the National Supplier Clearinghouse (NSC) in order to register successfully.

Registering now allows the AO and/or BAO time to correct the supplier’s NSC records if their name, date of birth, and SSN does not match what is on file with NSC. We recommend that BAOs register no later than October 9, 2009, so that they will be able to assist AOs with approving EU registration. Registration will close on November 4, 2009, at 9:00 p.m. EST – no AOs, BAOs, or EUs can register after registration closes. To register, go to the Competitive Bidding Implementation Contractor (CBIC) web site: http://www.dmecompetitivebid.com/.

We have three additional competitive bidding reminders for suppliers interested in participating in the Round 1 Rebid:

**GET LICENSED:** Suppliers submitting a bid for a product category in a competitive bidding area (CBA) must meet all DMEPOS state licensure requirements and other applicable state licensure requirements, if any, for that product category for every state in that CBA. Prior to submitting a bid for a CBA and product category, the supplier must have a copy of the applicable state licenses on file with the NSC. As part of the bid evaluation we will verify with the NSC that the supplier has on file a copy of all applicable required state license(s).

**GET ACCREDITED:** Medicare DMEPOS suppliers, unless exempt, must be accredited by October 1, 2009. Suppliers must be accredited for a product category in order to submit a bid for that product category. CMS will not accept bids from and will not contract with suppliers that are not accredited by a CMS-approved accreditation organization for the applicable product categories.

If you have already been notified by an approved accrediting organization that each of your practice locations has been accredited, the accreditation organization will notify the NSC that your DMEPOS supplier practice locations have been accredited. However, DMEPOS suppliers that obtain accreditation after September 1, 2009 but before October 1, 2009, should submit proof of accreditation to the NSC via submission of an amendment to their CMS-855S.

Further information on the DMEPOS accreditation requirements along with a list of the accreditation organizations and those professionals and other persons exempted from accreditation may be found at the CMS web site: http://www.cms.hhs.gov/MedicareProviderSupEnroll/01_Overview.asp.

**GET BONDED:** Medicare DMEPOS suppliers, unless exempt, must obtain and submit a surety bond by October 2, 2009. Suppliers subject to the bonding requirement must be bonded in order to bid in the DMEPOS competitive bidding program. A list of surety companies from which a bond can be secured is found at the Department of the Treasury’s “List of Certified (Surety Bond) Companies;” the web site is located at:
When submitting your DMEPOS surety bond to the NSC, you are required to submit sections 1, 2A1, 12, and either 15 (if you are the AO) or 16 (if you are the delegated official) of the CMS-855S. By submitting the required sections of the CMS-855S, you will help to ensure that NSC is able to correctly associate your DMEPOS surety bond to your enrollment record.

Sent: 9/11/2009
Subject: Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders’ Conference—What You Need to Know Before Submitting Your Bid

Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders’ Conference—What You Need to Know Before Submitting Your Bid

REMINDER: The third in a series of Special Open Door Forums (ODF), which serve as bidders' conferences, to provide information on the durable medical equipment, prosthetics, orthotics, and supplies competitive bidding program will be held on September 16, 2009, from 3:30 pm – 4:30 pm EDT. At this Special ODF, we will provide an overview of the policies for change of ownership, grandfathering, and traveling beneficiaries. In addition, we will discuss key contract supplier responsibilities required under the terms of the DMEPOS competitive bidding program supplier contract.

The PowerPoint presentation for this Special ODF is now available on the Competitive Bidding Implementation Contractor (CBIC) web site. We encourage those who will be participating to print out the PowerPoint presentation before the Special ODF. For more information on this presentation and other educational activities, please visit the CBIC web site, http://www.dmecompetitivebid.com/

Special Open Door Participation Instructions:
Dial: 1-800-837-1935 & Reference Conference ID: 23044660
Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp and will be accessible for downloading beginning Thursday, September 24, 2009.

For Open Door Forum schedule updates, E-Mailing list subscriptions, and to view Frequently Asked Questions please visit our website at http://www.cms.hhs.gov/opendoorforums/.

Thank you for your interest in CMS Open Door Forums.
**Sent: 9/11/2009**

**Subject: TODAY IS TARGET DMEPOS COMPETITIVE BIDDING REGISTRATION DEADLINE FOR AUTHORIZED OFFICIALS**

We would like to remind all suppliers interested in participating in the Round 1 Rebid of the Medicare durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program that registration for user IDs and passwords is open. If you are interested in bidding, you must designate one Authorized Official (AO) from those listed on the CMS-855S enrollment form to act as your AO for registration purposes. **Today is the target deadline for all AOs to register - we strongly urge all AOs who have not already registered to register TODAY to ensure that they have time to designate other supplier employees to use the on-line bidding system. Suppliers that do not register will not be able to bid when bidding opens.**

AOs who successfully register should receive their user IDs and passwords in the mail within 10 days after successful registration. After an AO successfully registers and receives his or her user ID and password, the AO may designate other supplier employees to serve as Backup Authorized Officials (BAO) and/or End Users (EU). BAOs and EUs must also register in order to be able to use the on-line bidding system. The legal name, date of birth, and Social Security number (SSN) of the AO and BAOs must match what is on file with the National Supplier Clearinghouse (NSC) in order to register successfully.

Registering now allows the AO and/or BAO time to correct the supplier’s NSC records if their name, date of birth, and SSN does not match what is on file with NSC. We recommend that BAOs register no later than October 9, 2009, so that they will be able to assist AOs with approving EU registration. Registration will close on November 4, 2009, at 9:00 p.m. EST – no AOs, BAOs, or EUs can register after registration closes. To register, go to the Competitive Bidding Implementation Contractor (CBIC) web site: [http://www.dmecompetitivebid.com/](http://www.dmecompetitivebid.com/).

If you have any questions about the registration process, please contact the CBIC Customer Service Center at 1-877-577-5331. For information about the competitive bidding areas and product categories included in the Round 1 Rebid, as well as bidder education materials, please visit the CBIC website.

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**Sent: 9/15/2009**

**Subject: Time is Running Out for Authorized Officials to Register for DMEPOS Competitive Bidding**

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**INFORMATION NOT RELEASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW:**
This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.
The target deadline for Authorized Officials (AOs) to register for the Round 1 Rebid of the Medicare durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program was September 14, 2009. All suppliers interested in bidding must designate one AO from those listed on the CMS-855S enrollment form to act as their AO for registration purposes. If you are a supplier interested in bidding and your designated AO has not yet registered, he or she should register now. Suppliers whose AOs do not register will not be able to bid when bidding opens. AOs who do not register now may not have time to designate other employees to assist with bidding.

Remember, the AO must be listed on the CMS-855S enrollment form. Once the AO registers, then the AO’s user ID and password will be sent by mail and should be delivered within 10 days after successful registration. After an AO successfully registers, the AO may designate other employees to serve as Backup Authorized Officials (BAOs) and/or End Users (EUs). BAOs and EUs must also register in order to be able to use the on-line bidding system. The legal name, date of birth, and Social Security number (SSN) of the AO and BAOs must match exactly with what is on file with the National Supplier Clearinghouse in order to register successfully. Legal names, dates of birth, and SSNs of all users must match what is on file with the Social Security Administration.

We recommend that BAOs register no later than October 9, 2009 so that they will be able to assist AOs with approving EU registration. Registration will close on November 4, 2009 at 9:00 p.m. EST – no AOs, BAOs, or EUs can register after registration closes.

To register, go to the Competitive Bidding Implementation Contractor (CBIC) website at http://www.dmecompetitivebid.com/. Please review the IACS Reference Guide for step-by-step instructions on registration. The CBIC web site also has the following useful tools: a registration checklist; Quick Step guides; and frequently asked questions. All suppliers interested in bidding are urged to sign up for E-mail Updates on the home page of the CBIC website. If you have any questions about the registration process, please contact the CBIC Customer Service Center at 1-877-577-5331.

Sent: 9/16/2009
Subject: Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders’ Conference: Financial Documentation Plus Small Supplier Considerations

Centers for Medicare & Medicaid Services
Special Open Door Forum:
Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)
Competitive Bidding Program Bidders’ Conference:
Financial Documentation Plus Small Supplier Considerations

Tuesday, September 22, 2009

INFORMATION NOT releASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW:
This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.
2:00 pm – 3:00 pm Eastern Time
Conference Call Only

Please join us for the fourth in a series of eight Special Open Door Forum (ODF) bidders’ conferences for the Round 1 Rebid of the Medicare durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program. At this Special ODF, we will provide an overview of the required financial documentation that must be submitted for each type of business structure and how bidders should report their capacity to serve beneficiaries. In addition, we will discuss special provisions for small suppliers and networks.

Reminder: Registration for user IDs and passwords is open. The target deadline for Authorized Officials interested in participating in the Round 1 Rebid to register was September 14, 2009. If you are an Authorized Official who has not yet registered – do it TODAY! Visit http://www.dmecompetitivebid.com/ to register.

Background:

On August 3, 2009, the Centers for Medicare & Medicaid Service (CMS) issued the bidding timeline for the Round 1 Rebid of the DMEPOS competitive bidding program and initiated a comprehensive bidder education campaign. CMS’ Competitive Bidding Implementation Contractor (CBIC) is the focal point for bidder education. Please visit the CBIC’s dedicated website, http://www.dmecompetitivebid.com/, for important information, including bidding rules, user guides, frequently asked questions, policy fact sheets, checklists, and bidding information charts. The CBIC toll-free help desk, 1-877-577-5331, is open to help bidders with all of their questions and concerns. All suppliers interested in bidding are urged to sign up for e-mail updates on the home page of the CBIC website.

We look forward to your participation.

Special Open Door Participation Instructions:
Dial: 1-800-837-1935 & Reference Conference ID: 23045166
Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp and will be accessible for downloading beginning Thursday, October 1, 2009.

For Open Door Forum schedule updates, E-Mailing list subscriptions, and to view Frequently Asked Questions please visit our website at http://www.cms.hhs.gov/opendoorforums/.

Thank you for your interest in CMS Open Door Forums.

INFORMATION NOT releASABLE TO THE PUBLIC UNLESS AUTHORIZED BY LAW:
This information has not been publicly disclosed and may be privileged and confidential. It is for internal government use only and must not be disseminated, distributed, or copied to persons not authorized to receive the information. Unauthorized disclosure may result in prosecution to the full extent of the law.
**Sent: 9/18/2009**

Subject: Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders' Conference-Financial Documentation Plus Small Supplier Considerations

Special Open Door Forum: Medicare DMEPOS Competitive Bidding Program Bidders’ Conference—Financial Documentation Plus Small Supplier Considerations

REMINDER: The fourth in a series of Special Open Door Forums (ODF), which serve as bidders' conferences, to provide information on the Medicare durable medical equipment, prosthetics, orthotics, and supplies competitive bidding program will be held on September 22, 2009, from 2:00 pm – 3:00 pm EDT. At this Special ODF, we will provide an overview of the required financial documentation that must be submitted for each type of business structure and how bidders should report their capacity to serve beneficiaries. In addition, we will discuss special provisions for small suppliers and networks.

The PowerPoint presentation for this Special ODF is now available on the Competitive Bidding Implementation Contractor (CBIC) web site. We encourage those who will be participating to print out the PowerPoint presentation before the Special ODF. For more information on this presentation and other educational activities, please visit the CBIC web site, [http://www.dmecompetitivebid.com/](http://www.dmecompetitivebid.com/)

Special Open Door Participation Instructions:
Dial: 1-800-837-1935 & Reference Conference ID: 23045166
Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at [http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp](http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp) and will be accessible for downloading beginning Thursday, October 1, 2009.


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**Sent: 9/20/2009**

Subject: Special Open Door Forum: Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program Bidders’ Conference - How a Bid is Evaluated

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Centers for Medicare & Medicaid Services
Special Open Door Forum:
Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)
Competitive Bidding Program Bidders’ Conference-
How a Bid is Evaluated

Tuesday, September 29, 2009
2:00 pm – 3:00 pm Eastern Time
Conference Call Only

Please join us for the fifth in a series of eight Special Open Door Forum (ODF) bidders’ conferences for the Round 1 Rebid of the Medicare durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) competitive bidding program. At this Special ODF, we will walk through the bid evaluation process. This will include discussions about the components of bid evaluation and calculations of the single payment amounts.

Reminder: Registration for user IDs and passwords is open. We recommend that Backup Authorized Officials register no later than October 9, 2009. The target deadline for Authorized Officials (AO) interested in participating in the Round 1 Rebid to register was September 14, 2009. If you are an AO who has not yet registered – do it TODAY! To register, go to the Competitive Bidding Implementation Contractor (CBIC) web site: http://www.dmecompetitivebid.com/

Background:

On August 3, 2009, the Centers for Medicare & Medicaid Service (CMS) issued the bidding timeline for the Round 1 Rebid of the DMEPOS competitive bidding program and initiated a comprehensive bidder education campaign. CMS’ Competitive Bidding Implementation Contractor (CBIC) is the focal point for bidder education. Please visit the CBIC's dedicated website, http://www.dmecompetitivebid.com/, for important information, including bidding rules, user guides, frequently asked questions, policy fact sheets, checklists, and bidding information charts. The CBIC toll-free help desk, 1-877-577-5331, is open to help bidders with all of their questions and concerns. All suppliers interested in bidding are urged to sign up for e-mail updates on the home page of the CBIC website.

We look forward to your participation.
Special Open Door Participation Instructions:
Dial: 1-800-837-1935 & Reference Conference ID: 23045547
Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880. A Relay Communications Assistant will help.

An audio recording of this Special Forum will be posted to the Special Open Door Forum website at http://www.cms.hhs.gov/OpenDoorForums/05_ODF_SpecialODF.asp and will be accessible for downloading beginning Wednesday, October 7, 2009.

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For Open Door Forum schedule updates, E-Mailing list subscriptions, and to view Frequently Asked Questions please visit our website at http://www.cms.hhs.gov/opendoorforums/.

Thank you for your interest in CMS Open Door Forums.