

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



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- [“Centers for Medicare & Medicaid Services \(CMS\) Electronic Mailing Lists: Keeping Health Care Professionals Informed”](#) Fact Sheet, ICN 006785, Downloadable only.

MLN Matters® Number: MM8390

Related Change Request (CR) #: CR8390

Related CR Release Date: August 2, 2013

Effective Date: October 5, 2013

Related CR Transmittal #: R2755CP

Implementation Date: October 5, 2013

Additional States Requiring Payment Edits for DMEPOS Suppliers of Prosthetics and Certain Custom-Fabricated Orthotics. Update to CR 3959

Note: This article was revised on June 6, 2014, to add a reference to MLN Matters® article MM8730 (<http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/MM8730.pdf>), which adds North Dakota, Iowa and Pennsylvania to the list of states that require the use of a licensed/certified orthotics or prosthetist for furnishing of prosthetics and orthotics. All other information is unchanged.

Provider Types Affected

This MLN Matters® article is intended for suppliers in Alabama, Arkansas, Florida, Georgia, Illinois, Kentucky, Mississippi, New Jersey, Ohio, Oklahoma, Rhode Island, Tennessee, Texas, and Washington who bill Durable Medical Equipment Medicare Administrative Contractors (DME MACs) for Prosthetics and Orthotics (P&O) provided to Medicare beneficiaries.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2012 American Medical Association.

Provider Action Needed

This article is based on Change Request (CR) 8390 which instructs DME MACs to revise programming edits so that Arkansas, Georgia, Kentucky, Mississippi, and Tennessee are added to the logic, in accordance with CR3959 (Transmittal 656; August 19, 2005). CR3959 instructed DME MACs to implement claims processing edits to ensure compliance with CMS regulations which require Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) suppliers wishing to bill Medicare to operate their business and furnish Medicare-covered items in compliance with all applicable Federal and State licensure and regulatory requirements. At the time CR3959 was issued and DME MACs implemented the edit, there were nine (9) states (including Alabama, Florida, Illinois, New Jersey, Ohio, Oklahoma, Rhode Island, Texas, and Washington) which required the use of a licensed/certified orthotist or prosthetist for furnishing of orthotics or prosthetics. Since that time, five (5) additional states have instituted requirements for the use of a licensed/certified orthotist or prosthetist for furnishing of orthotics or prosthetics. CR8390 instructs DME MACs to revise programming edits so that the five additional states including Arkansas, Georgia, Kentucky, Mississippi, and Tennessee are added to the logic, in accordance with CR3959.

See the Background and Additional Information Sections of this article for further details, and make sure that your billing staffs are aware of these changes.

Background

The Centers for Medicare & Medicaid Services (CMS) issued Change Request (CR) 3959 (Transmittal 656) on August 19, 2005, which instructed DME MACs to implement claims processing edits to ensure compliance with CMS regulations found at 42 CFR 424.57(c)(1). Such regulations require DMEPOS suppliers wishing to bill Medicare to operate their business and furnish Medicare-covered items in compliance with all applicable Federal and State licensure and regulatory requirements.

You can find the MLN Matters® article (MM3959) corresponding to CR3959 at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM3959.pdf> on the CMS website. You can also review 42 CFR § 424.57(c)(1) at <http://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&SID=5f8d8d2cda131ddbf2c2e24b532cce14&rgn=div8&view=text&node=42:3.0.1.1.11.4.5.8&idno=42> on the Internet.

CR8390 instructs DME MACs to revise programming edits so that Arkansas, Georgia, Kentucky, Mississippi, and Tennessee are added to the logic, in accordance with CR3959. You can review the list of Healthcare Common Procedure Coding System (HCPCS) codes for customized orthotics and prosthetics affected by edit. That is attached to CR3959 at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/r656cp.pdf> on the CMS website.

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Additional Information

The official instruction, CR8390, issued to your DME MACs regarding this change may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R2755CP.pdf> on the CMS website.

If you have any questions, please contact your DME MACs at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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