

What about medical equipment and supplies I get from my doctor or hospital?

Medicare will help pay for a walker that your doctor or other provider (including a physician assistant, clinical nurse specialist, or nurse practitioner) gives you, even if he or she isn't a Medicare-contract supplier, as long as the walker is supplied in the office during a visit for medical care.

If you're admitted to a hospital and need a walker, Medicare will also help pay for it if the hospital gives it to you while you're admitted or on the day you're discharged from the hospital even if the hospital isn't a contract supplier.

I have Medicare and Medicaid. Will Medicaid cover an item I get from a non-contract supplier if Medicare doesn't cover it?

If you have Medicare and Medicaid and live in a competitive bidding area, you'll have to get supplies and equipment from a Medicare-contract supplier. Medicaid will pay the deductibles and coinsurance for those services.

- You may still be able to get supplies and equipment that Medicare doesn't cover, but your state Medicaid program does, from any Medicaid-participating provider.
- For more information, call or visit your Medicaid office. To get the phone number for your state, visit Medicare.gov/contacts. You can also call 1-800-MEDICARE (1-800-633-4227), and say "Medicaid." TTY users should call 1-877-486-2048.

For more detailed information, visit Medicare.gov/publications to view "Your Guide to Medicare's Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program."



Medicare's Competitive Bidding Program for Equipment & Supplies

The information in "Medicare's Competitive Bidding Program for Equipment & Supplies" describes the Medicare program at the time it was printed. Changes may occur after printing. Visit Medicare.gov, or call 1-800-MEDICARE (1-800-633-4227) to get the most current information. TTY users should call 1-877-486-2048.

"Medicare's Competitive Bidding Program for Equipment & Supplies" isn't a legal document. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings.

You have the right to get the information in this product in an alternate format. Visit Medicare.gov/about-us/nondiscrimination/nondiscrimination-notice.html, or call 1-800-MEDICARE for more information.



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CENTERS FOR MEDICARE & MEDICAID SERVICES





To check if an item you use is included in the competitive bidding program, or to find out if you live in a ZIP code that's part of the program, visit Medicare.gov/supplier, or call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

Medicare's Competitive Bidding Program for durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) changes the amount Medicare pays for certain DMEPOS items and which suppliers you can use.

On July 1, 2016, the suppliers who are eligible to provide certain medical equipment and supplies in your area may change. It's important to know if you're affected by this program to make sure Medicare will help pay for your item and to avoid any disruption of service.

Does the program affect me?

If you have Original Medicare, live in one of the competitive bidding areas, and use equipment or supplies included under the program (or get the items while visiting a competitive bidding area), you generally must use Medicare contract suppliers if you want Medicare to help pay for the item. If you live in one of the competitive bidding areas and you're renting oxygen equipment or certain other durable medical equipment (DME) when the program starts, you can continue renting these items from your current supplier if that supplier gets a new contract or decides to participate in the program as a "grandfathered" supplier. If you live in (or get these items while visiting) these areas and don't use a Medicare contract or a grandfathered supplier, Medicare probably won't pay for the item, and you may have to pay full price.

DMEPOS Competitively Bid Items

Commode chairs	Patient lifts
Continuous positive airway pressure (CPAP) devices and related supplies	Respiratory assist devices (RADs) and related supplies
Diabetes test strips (mail-order only)*	Scooters and related accessories
Enteral nutrient equipment and supplies	Seat lifts
External infusion pumps and supplies**	Support surfaces (group 1 and group 2)
Hospital beds and related accessories	Transcutaneous electrical nerve stimulation (TENS) devices
Nebulizers (standard) and related supplies	Walkers
Negative Pressure Wound Therapy (NPWT) pumps and related supplies	Wheelchairs (standard power or manual) and related accessories
Oxygen and related equipment and supplies	

* Includes all parts of the U. S., including the 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, and American Samoa. Doesn't include glucose meters.

** Only included in the DMEPOS Competitive Bidding Program in certain areas. These items will no longer be included in the program beginning January 1, 2017.

Do I have to change doctors?

No. The program doesn't affect which doctors you can use.

What if I need a specific brand or way of getting a competitively bid item or service?

If you need a particular brand or way of getting an item or service, your doctor must prescribe the specific brand or way of getting it in writing. Your doctor must document in your medical record why this specific brand or delivery is needed to avoid an adverse medical outcome. In these situations, a Medicare contract supplier must:

- Give you the exact brand or delivery of the item or service your doctor prescribes for you
- Help you find another contract supplier that offers that brand or delivery
- Work with your doctor to find a different brand or delivery and get a revised written prescription

