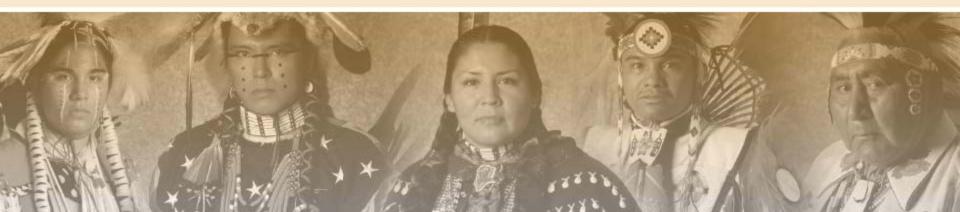
DMEPOS Accreditation for the IHS and the Tribal Pharmacies January 15, 2009

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STATUTORY AUTHORITY

- Section 302(a)(1) of the MMA added Section §1834(a)(20) to the Act, which requires the Secretary to establish and implement quality standards for suppliers of DMEPOS
- Section §1847(b)(2)(A)(i) of the Act requires DMEPOS suppliers to meet the quality standards before being awarded a contract under the Medicare DMEPOS Competitive Bidding Program

DMEPOS ACCREDITATION

- Section §1834 (a)(20)(D) of the Act requires that CMS apply these quality standards to suppliers of the following items for which we deem the standards to be appropriate
 - (i) Covered items defined in 1834 (a)(13);
 - (ii) Prosthetic devices, orthotics and prosthetics described in section 1834(h)(4); and
 - Quality Standards were developed in August 2006 and revised in the Fall 2008

Items and services describe in section 1842(s)(2)

- Medical supplies
- Home dialysis supplies & equipment
- Therapeutic shoes
- Parenteral & enteral nutrients
- Blood products
- Transfusion medicine
- Prosthetic devices & orthotics

NON-COVERED ITEMS

Does not include

- Medical supplies furnished by Home Health Agencies
- Drugs used with DME (inhalation drugs and drugs infused with a DME pump)
- Other Part B drugs
 - Immunosuppressive drugs
 - Anti-emetic drugs

- All DMEPOS suppliers must comply with the quality standards in order to retain a supplier billing number and to receive Medicare Part B payment
- Section §1834(a)(20)(E) of the Act, states that the quality standards shall be published on the CMS' Internet website

 The DMEPOS Quality Standards are posted on our website at:

http://www.cms.hhs.gov/medicareprovidersupenroll

- Section One: Business Standards
 - Apply to all DMEPOS suppliers
 - Focuses on:
 - Administration
 - Financial Management
 - Human Resource Management
 - Consumer Services
 - Performance Management
 - Product Safety
 - Information Management

- Section Two: Supplier Product-Specific Service Requirements
 - Focus on the product specialization of the supplier and provides details of supplier service standards
 - From intake of the physician order to
 - Assessment to
 - Delivery and Set up, Education and
 - Follow-up

- The three Appendices are:
 - Appendix A: Respiratory Equipment, Supplies, and Services
 - Appendix B: Manual Wheelchairs and PMD, including Complex Rehab and Assistive Technology
 - Appendix C: Custom Fabricated, Custom Fitted, Custom-Made Orthotics, Prosthetic Devices, Somatic, Ocular and Facial Prosthetics, and Therapeutic Shoes and Inserts

ACCREDITING ORGANIZATIONS

- There are 10 Accrediting Organizations (AOs) that have been deemed on November 2006 to accredit DMEPOS suppliers using CMS' quality standards
- The AOs are listed under the Medicare Provider Enrollment website at:

http://www.cms.hhs.gov/medicareprovidersupenroll

- For the Tribal pharmacies you will be going through the RFP process to determine who will be the accreditation organization that will work with all of the pharmacies
- The IHS has decided not to pursue accreditation since their statutory authority sunsets on December 31, 2009

ACCREDITATION PROCESS

PRE-APPLICATION PROCESS

- A DMEPOS supplier that wishes to become accredited should contact the AOs and obtain information about each organization's accreditation process
- The supplier should review the information and choose the organization to which it will apply
- For the Tribal pharmacies, this process would be through your procurement

ACCREDITATION PROCESS

PRE-APPLICATION PROCESS

- The AO will assist the pharmacy supplier to determine what changes will be required to meet the accreditation standards (modify existing services, practices, developing appropriate policies and procedures, develop an implementation plan, timeline, and training employees)
- The pharmacy supplier should apply for accreditation after the changes are in place or during implementation
- Most likely this communication will happen with your pharmacy liaison

ACCREDITATION PROCESS

APPLICATION REVIEW & ON-SITE SURVEY

- The pharmacy supplier submits a completed application to the AO with all supporting documentation
- The AO reviews the application and documentation (verify licensures, organizational chart, etc.)
- Conducts an unannounced on-site survey
- The AO will determine whether to accredit the supplier based on the submitted data and the results of the on-site survey

SURVEY PROCESS POLICY

- The on-site survey will not occur at every pharmacy location
 - Sampling occurs:
 - determined based on location of the pharmacy complexity and volume of supplies
- The unannounced on-site survey will be performed, at least, every 3 years
- Accreditation cannot be transferred upon merger, acquisition or sale. CMS, the NSC and the AO must be notified

Deemed accreditation organizations

- Accreditation Commission for Health Care, Inc.
- American Board for Certification in Orthotics & Prosthetics, Inc.
- Board of Certification/Accreditation International
- Commission on Accreditation of Rehabilitation Facilities
- Community Health Accreditation Program
- Health Care Quality Association on Accreditation
- National Association of Boards of Pharmacy
- The Compliance Team, Inc.
- The Joint Commission
- The National Board of Accreditation for Orthotic Suppliers

Accreditation Decisions

- What if I am currently accredited by an organization that is not on the list?
 - Your organization does not meet the quality standards for DME in order to continue to bill after September 30, 2009
 - You must contact one of the CMS approved organizations in order to continue to bill Medicare for your DME supplies.
 - Keep in mind that pharmacies can continue to bill for Part B drugs, just not your DME supplies

ACCREDITATION DEADLINE

JANUARY 31, 2009

CMS recommended deadline by which a complete accreditation application must be submitted to the AO to ensure the DMEPOS supplier will receive an accreditation decision by September 30, 2009.

SEPTEMBER 30, 2009

Deadline by which all existing DMEPOS suppliers must be accredited (excepted the exempted professionals and other persons).

SUPPLIER ENROLLMENT PROCESS

- Go to the website at: <u>http://www.cms.hhs.gov/medicareprovidersupenroll</u>
 - Under "Tips to facilitate the Medicare Enrollment Process. There is a link to the 855 S enrollment application.
 - Follow the instructions on the form and send into the National Supplier Clearinghouse (NSC)
 - The NSC will not process any new applications unless you are accredited

DUAL ELIGIBLE STATUS

- DMEPOS accreditation rules only effect Medicare billing
 - However, some states do not allow you to bill Medicaid unless you are an approved Medicare provider
 - In order to retain your Medicare provider privileges to bill for your DME supplies, you must be accredited
 - CMS has not made any recommendations to the States regarding adopting comparable standards for Medicaid that I am aware
 - Check with your State to see what their rules are

CHAIN ACCREDITATION

- Both the IHS and the Tribal Pharmacies meet the definition of a chain, using Public Law 638
- Requirements:
 - Governing Body for all of the entities
 - Same or similar policies and procedures
 - Evident that all locations have a line of communication to the governing body

ACCREDITATION COSTS

- FOR THREE YEARS THE TOTAL IS AVERAGING \$4000.00 FOR A SINGLE LOCATION
 - As chains, this cost can be substantially lower since not all locations will be on-site surveyed
 - The cost is not all up front
 - Some accreditors do installment plans
 - The cost averages approx. \$1,300.00 per year

PHARMACIES OPT OUT

- · It is a business decision to remain in the program
- IHS has chosen to opt out after October 1, 2009 since the statutory authority allowing for such billing sunsets on December 31, 2009

- How can beneficiaries identify who is an approved pharmacy?
 - The same way that they do now signage and outreach to their patient population-

DMEPOS Accreditation Team

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