

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1929	Date: October 6, 2017
	Change Request 10291

SUBJECT: CMS Approved Review Topics for Durable Medical Equipment, Prosthetic, Orthotics, Supplies (DMEPOS)

I. SUMMARY OF CHANGES: The CMS Approved Review Topics list (CART) is a menu of items designed to focus and direct contractors to effectively use medical review resources, while also reducing appeals and provider burden. This CART list covers Durable Medical Equipment, Prosthetic, Orthotics, Supplies (DMEPOS).

EFFECTIVE DATE: November 6, 2017

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: November 6, 2017

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	N/A

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

One Time Notification

Attachment - One-Time Notification

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I. GENERAL INFORMATION

A. Background: There has been a recent focus on balancing the weight of provider burdens, such as the cost and time associated with maintaining or retrieving certain documentation to support claims payment, with the Agency’s fiscal responsibility to ensure the appropriateness of claims payment. Such attentions are (in part) a result of recent increases in medical review decisions, subject to appeal, which may not be upheld when adjudicated by the Office of Medicare Hearings and Appeals. This has led to an influx of cases to be heard before Administrative Law Judges (ALJs), and has resulted in a backlogged Medicare hearing process.

The Center for Program Integrity (CPI), in conjunction with its counterparts in the Center for Medicare, has been trying to identify holistic approaches to not only resolve the current backlog, but also to implement processes to avoid its prospective recurrence. One such project, referred to as CMS Approved Review Topics (CART), tries to identify those issues that are most appropriate for medical review, based on (i) the Trust Fund vulnerability that a review seeks to prevent, and (ii) the likelihood that the review will be meritorious on appeal (that is, whether it may be conceived as a technical denial and overturned).

The CPI has compiled its first list of review topics, pertaining to Durable Medical Equipment, Prosthetic, Orthotics, Supplies (DMEPOS), which it believes to be an effective use of medical review resources and indicative of a claim’s appropriateness for payment.

B. Policy: N/A

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility										
		A/B MAC			D M E	Shared- System Maintainers				Other		
		A	B	H H H		F M V C	M C M W	C S S F				
10291.1	The MAC shall use this change request as direction to conduct targeted medical review selecting from the topics provided in the CMS Approved Review Topics (CART) list.				X							
10291.1.1	The MAC shall only use those topics identified by the CART list for any given review category.				X							
10291.1.1.1	The MAC shall have the option to select from within the CART list, but it is not the intent of this CR to direct the MACs to review every topic on the CART				X							

Number	Requirement	Responsibility								
		A/B MAC		H H H	D M E M A C	Shared- System Maintainers				Other
		A	B			F I S S	M C S	V M S	C W F	
	list or even every topic within a category of the CART list.									
10291.2	The MAC shall use their Improper Payment Reduction Strategy and other data analysis methods to determine the targeted providers.				X					
10291.3	The CMS shall have the option to update the CART list periodically, when items are identified that merit inclusion/removal.				X					
10291.3.1	The CMS shall have the option to add/remove items upon request via the contacts listed in BR 3.1.1.				X					
10291.3.1.1	Requests shall be made to Dr. Scott H. Lawrence, Jennifer Phillips, Heather Wetherson, Doris Jackson, and the Contracting Officer Representative (COR) and the pertinent CMS Business Function Lead (BFL), as applicable. NOTE: For email addresses, please see Section V of this document titled Contacts.				X					

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility					
		A/B MAC			D M E M A C	C O R I	C O O R D I N A T O R
		A	B	H H H			
	None						

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A
"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Heather Wetherson, 410-786-5657 or Heather.Wetherson@cms.hhs.gov , Jennifer Phillips, 410-786-1023 or Jennifer.Phillips@cms.hhs.gov , Jill Nicolaisen, 410-786-5873 or Jill.Nicolaisen@cms.hhs.gov , Dr. Scott H. Lawrence, 410-786-4313 or Scott.Lawrence1@cms.hhs.gov, Doris Jackson, 410-786-4459 or Doris.Jackson@cms.hhs.gov.

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 1