

**Durable Medical  
Equipment Regional  
Carrier (DMERC)  
Region A**

**Supplier Notices**

**1997**

**Supplier Notice 97-35**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: December 9, 1997

**Addition to Supplier Notice 97-29 Date of Service/Date of Delivery/Date of Discharge**

This notice serves as a continuance to the previously issued Supplier Notice 97-29, "Date of Service/Date of Delivery/Date of Discharge", dated August 25, 1997. All information as published in Supplier Notice 97-29, in addition to the below, is applicable in reference to this issue.

As a result of Supplier Notice 97-29, the DMERC received several requests for clarification:

**1. Can a supplier deliver DME to a hospital or nursing home to facilitate a discharge?**

\*DME can be delivered to a facility (i.e., hospital or nursing home) on the **same day** as the date of discharge for the patient to take home, in order to facilitate the discharge. Equipment may not be delivered for use at or by the facility.

**a. How should the "place of service" be documented on the claim generated to the DMERC when the equipment is delivered on the date of discharge?**

\*Place of service 12 (home) would be documented on the claim when equipment is delivered to the facility on the same day the patient is discharged to go home.

**b. Can a supplier deliver equipment to a customer's home prior to the date of discharge (i.e., bed, trapeze, commode, etc.)? What date should be on the claim generated to the DMERC Region As the "date of service" - the actual date of delivery or the date of discharge? How should the supplier document this - (i.e., billing chart or HA0 record) or both? How should "place of service" be documented on the claim?**

\*As stated in Supplier Notice 97-29 - "This should not be a routine practice." However, circumstances may exist which require the equipment to be delivered or shipped to the **patient's home**, prior to discharge, for **immediate** use upon their arrival home. In these situations, the date of service would be the final date of discharge and the place of service would be 12 (home) . Documentation/information relating to such circumstances must be retained in the supplier's records and available to the DMERC if requested. It does not need to be reported in the HA0 record or on the claim. **Delivery of DME to a facility for beneficiary's use, prior to the date of discharge, is not acceptable.** Supplier Notice 97-29 states - "Delivery of DMEPOS to be used by the beneficiary prior to discharge in a facility considered to be an inappropriate place of service for the item provided, is not an acceptable practice. Submitting a claim for DME used in a facility other than a beneficiary's home, as defined in Chapter 12 of the Region A Supplier Manual, page 12-16, and billing an inappropriate place of service on the claim could constitute fraud."

**c. If the equipment is delivered on the scheduled day of discharge, then the actual discharge date is changed after the delivery due to medical or other complications (i.e., patient spikes a temperature), how should this be documented?**

\*Documentation from the hospital should be obtained by the supplier (i.e., copy of discharge summary/record) to establish a paper trail of the events from the original scheduled date of discharge up to the final date of discharge. In such circumstances, the final date of discharge to the patient's home would be used as the date of service on the

claim to the DMERC, with place of service 12(home). The documentation would be retained in the supplier's records and available to the DMERC if requested.

2. **As stated in Supplier Notice 97-29 "For mail order DMEPOS provided immediately subsequent to a hospital inpatient stay and/or DME immediately following a nursing home stay, the DOS is the latter of the actual shipping date or the date of discharge. Under no circumstances can the DOS be earlier than the date of delivery, or, in case of mail order DMEPOS, the shipping date." Since the DOS (date of service) can be changed to the discharge date on mail order, can the DOS be changed to the discharge date for equipment delivered to the hospital, nursing home or home?**

\*The date of service normally is the date of delivery or shipping date. Exceptional circumstances where the discharge date could perhaps be used as the date of service are described in our response to question 1(b). Outside of these exceptional situations, the date of service is the date of delivery or the shipping date.

3. **Can the DME be delivered to the hospital prior to the patients discharge date for evaluation purposes by the medical staff? (i.e.: wheelchair and ventilators)**

\*The critical issue is the date the patient takes possession of the equipment. Possession will generally be determined by the date the patient accepts the equipment, as shown on the delivery slip. **If the patient takes possession prior to discharge the DME is NOT covered.**

- a. **What would be considered appropriate documentation to have on record for billing purposes?**

\*A patient signed delivery ticket that the DME equipment was provided to the patient (ownership transferred) **on the date of discharge.**

**Supplier Notice 97-34**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: October 29, 1997

**Surety Bonds**

The Balanced Budget Act of 1997 requires that each DMEPOS supplier have a surety bond for services furnished on or after January 1, 1998. HCFA is in the process of working out the details of the bonding requirements, which will be promulgated via regulation.

Each supplier also will receive notification from the National Supplier Clearinghouse (NSC) as to the supplier's requirements in regard to its bond. These requirements will include the penal (dollar) amount of the bond, deadline for submitting the bond to the NSC, and other specifics such as the time period to be covered by the bond. New suppliers applying after the effective date will be required to have a \$50,000 bond that also meets the other requirements. Existing suppliers should have ample time after receipt of this notice to obtain a bond.

**NO ACTION IS NECESSARY UNTIL YOU RECEIVE NOTIFICATION FROM THE NSC.**

**Supplier Notice 97-33**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: October 13, 1997

**Non-Licensed Pharmacy**

A drug used as a supply with DME or a prosthetic device (e.g., nebulizer drugs, IV medications for pain management, antiviral drugs, cancer treatments or parenteral nutrients) is not covered by Medicare if the drug is dispensed by an entity that is not licensed to dispense the drug. The drug is not considered to be reasonable and necessary because we cannot be assured of its safety and effectiveness unless it is dispensed by an entity that has a state license that qualifies it to dispense the drug. The equipment used with the drugs not dispensed by a licensed entity is also not considered to be reasonable and necessary because of related safety and efficacy questions.

The DMERC will deny claims (drugs and equipment) when the files show the supplier is not licensed to dispense prescription drugs. These are medical necessity denials based on section 1862 (a) (1). Routine or blanket waivers are not applicable in this circumstance. Please refer to Chapter 12 of the Region A Supplier Manual for more details on waiver of liability.

**If a supplier is providing the related equipment (e.g., nebulizer, infusion pump, parenteral pump) to be used in conjunction with the drugs, it is that supplier's responsibility to check on the licensure of the pharmacy before providing and billing for the equipment. If the pharmacy is unlicensed, the drugs will be denied, therefore, the related equipment may also be denied. Any claims paid to an unlicensed pharmacy will be recouped and payments made to any supplier for the related equipment may be subject to review, denial and recoupment.**

**A post-payment review of claims for drugs supplied after December 1, 1996 is currently being conducted. To date, relatively few active, unlicensed pharmacies have been identified in Region A.**

**Supplier Notice 97-32**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: September 19, 1997

**End-Stage Renal Disease (ESRD) Coverage Update**

Prior to enactment to the Balanced Budget Act (BBA) of 1997, Medicare benefits were secondary to benefits payable under a GHP in the case of individuals entitled to benefits on the basis of ESRD during an 18-month coordination period. The coordination period begins with the first month the individual is eligible for Medicare, whether or not the individual is actually entitled or enrolled.

Under this provision, the GHP must be billed first for services provided to a Medicare ESRD beneficiary. If the GHP does not pay for covered services in full, Medicare may pay secondary benefits in accordance with current billing instructions. This provision applies to all Medicare covered items and services (not just treatment of ESRD) furnished to beneficiaries who are in the coordination period.

Section 4631 (b) of the BBA of 1997 permanently extends the coordination period to 30 months for any individual whose coordination period began on or after March 1, 1996. Therefore, individuals who have not completed an 18-month coordination period by July 31, 1997, will have a 30 month coordination period under the new law. This provision does not apply to individuals who would reach the 18-month point on or before July 31, 1997. These individuals would continue to have an 18-month coordination period.

**Supplier Notice 97-31**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: September 22, 1997

**Supplier Alert**

The Region A DMERC has recently developed a new method of notifying the Supplier community of important time sensitive information. This new method is called a "**Supplier Alert**". The Supplier Alert will not be published in the DME Medicare newsletter, however, they will be faxed to the State Supplier Associations and will be available on the Bulletin Board (BBS) for electronic submitters and the Automated Response Unit (ARU).

**Supplier Notice 97-30**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: September 12, 1997

**New Code for Methotrexate**

Effective for dates of service on or after October 1, 1997 the new NDC number for Methotrexate will be NDC# 00677-1610-01, manufactured by United Research Lab. This code must be used on claims submitted to the DMERC.

**Supplier Notice 97-29**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: August 25, 1997

**Date of Service/Date of Delivery/Date of Discharge**

The Region A DMERC has been working closely with HCFA (Health Care Finance Administration) to obtain clarification on the relationship of date of service, date of delivery and date of discharge.

As a result of our collective efforts, the following information has recently been issued for publication by HCFA to the DMERC:

"Medicare law limits Part B payment for DME to that which is used in the patient's home. Hospitals and nursing homes cannot be considered a patient's home for DME purposes. Generally, for all DMEPOS, the supplier's date of service (DOS) is the date of delivery to a beneficiary's home. For DMEPOS provided to a beneficiary immediately subsequent to a hospital inpatient stay and/or DME immediately following a nursing home stay, the DOS is the date of final discharge to the beneficiary's home. For mail order DMEPOS provided immediately subsequent to a hospital inpatient stay and/or DME immediately following a nursing home stay, the DOS is the latter of the actual shipping date or the date of discharge. Under no circumstances can the DOS be earlier than the date of delivery, or, in the case of mail order DMEPOS, the shipping date. "

The following are questions and answers as anticipated by the DMERC in reference to this notification:

**QUESTION:** Can I routinely provide DMEPOS prior to discharge?

**ANSWER:** This should not be a routine practice. As stated above - "Generally, for all DMEPOS, the supplier's date of service is the date of delivery to the beneficiary's home." This clarification is to address those circumstances that may be an exception to this general rule, (e.g., beneficiary needs the DMEPOS immediately upon arrival at his/her home; the date of discharge changes or cannot be precisely determined before delivery.)

**QUESTION:** Can the DMERC provide a supplier with the date of discharge?

**ANSWER:** Due to the Privacy Act, the DMERC cannot provide this information. This is the responsibility of the supplier to obtain from the beneficiary, hospital, nursing facility, etc.

This clarification does allow the supplier some flexibility as to when DMEPOS is delivered to a beneficiary who is to be discharged in the near future. However, the date of discharge should not be used unless the beneficiary requires and will use the DMEPOS as soon as they arrive home.

Delivery of DMEPOS to be used by the beneficiary prior to discharge in a facility considered to be an inappropriate place of service for the item provided, is not an acceptable practice as a result of this notification.

Submitting a claim for DME used in a facility other than a beneficiary's home, as defined in Chapter 12 of the Region A Supplier Manual, page 12-16, and billing an inappropriate place of service on the claim could constitute fraud.

**Supplier Notice 97-28**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: August 1, 1997

**Acknowledgment Reports**

As of October 1, 1997, with the implementation of version 3.01 of the National Standard Format (NSF), we will no longer be faxing acknowledgment reports to electronic submitter. If you are experiencing problems, please call our EDI help desk at (717) 735-9429, Monday through Friday, 8:00am - 4:00pm

**There will be no exceptions.**

**Supplier Notice 97-27**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: July 29, 1997

**New Oxygen CMN (DMERC 484.2)**

The new certificate of medical necessity(CMN) for Oxygen (DMERC 484.2) that is included with the July newsletter is incorrect. In section A of the Oxygen CMN, the recertification box was omitted.

When using this CMN for a recertification, cross out the word revised, write recertification and place the date in the appropriate space. A revised Oxygen CMN will be published in the future.

If you have any questions on the above information, contact our Provider Services Unit at (717) 735-9445, Monday - Friday, 8:00 a.m. to 4:00 p.m.

**Supplier Notice 97-26**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: July 29, 1997

**Attention!! Accelerate Software Users**

Effective October 1, 1997 the Region A DMERC will begin charging for the cost of materials and shipping for each software package mailed. The cost for the Accelerate software package will be \$15.00. We are notifying you, the supplier community, in preparation of the new version of Accelerate that will be available this fall. The new version will incorporate version 3.01 of the National Standard Format (NSF) and include the latest Certificate of Medical Necessity (CMN) revisions. More information will be released as it becomes available.

Questions regarding the above information or the software may be directed to the Region A DMERC EDI help desk at (717) 735-9429, Monday - Friday 8:00 a.m. - 4:00 p.m.

### Supplier Notice 97-25

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: July 25, 1997

### Product/Process Focus Groups (P/PFG) Ombudsmen/Professional Relations

As we continue to progress with the P/PFG (Product/Process Focus Group) initiative, this article offers more details on this project as it pertains to the Ombudsmen and the Professional Relations Department.

An introduction to P/PFG was published in the March 1997 DME Medicare News. This initiative was also discussed at our Spring '97 seminars throughout April and at all of the recent State Association conventions/meetings.

The objective of the P/PFG initiative is to improve our service to the supplier community and produce a more consistent processing product.

The first step in initiating this project was to form six work groups representing each of the designated policy categories. The groups include a representative from each department within DMERC Region A which currently meet on a bi-weekly basis. These groups address and work to resolve issues that exist within their designated category.

**Effective August 1, 1997**, Ombudsmen will be assigned to specialty categories. Each will be assigned a primary product category and a secondary product category. In certain circumstances, geographic territory assignments as they have been established up to this point, will still remain. These circumstances will be addressed later in this article.

As of **August 1st**, there will be only one designated phone number to reach the Ombudsmen. The phone number will be 717-735-9666. When you contact the Ombudsmen at this number, you will be instructed to select the policy category in relation to your inquiry. You will then reach the Ombudsman assigned to that category.

This is a new direction for the DMERC Region A and we realize there will be questions as we move along in this process. The following are questions and answers as anticipated by Professional Relations:

1. **Which Ombudsman is assigned to which category?**

Please refer to the chart following this article for Ombudsmen assignments.

2. **How will Ombudsmen assignments to P/PFG categories affect previously assigned State Association contacts?**

The Ombudsmen will continue as currently assigned to State Associations. Please refer to the chart following this notice.

3. **What does assignment of Ombudsmen to primary & secondary categories mean?**

Each Ombudsman will be assigned to a category as their "primary" category. This category will be the one they are primarily involved in. The secondary category will be the category in which the Ombudsman will serve as back-up/support if the primary Ombudsman for that category is unavailable.

4. **What if I have a general question/issue that is not category specific?**

General questions should be directed to our Provider Customer Service Unit at (717) 735-9445. If necessary, the representative will refer the call to the appropriate Ombudsman.

**5. What if my question/issue is not general or category specific, but is an educational issue or an issue requiring the assistance of an Ombudsman?**

There will be a selection option available when you contact the Professional Relations department designated "General Education" for this situation.

**6. What if I have questions/issues involving multiple categories?**

If your questions/issues are of an educational nature or need the assistance of an Ombudsman, you should contact the Ombudsman assigned to your area code. This Ombudsman will gather information/responses as necessary and will respond to you. If necessary, you may request to speak to each category assigned Ombudsman for possible further discussion/resolution.

**7. Will the provider services unit be divided by PPFG categories?**

Not at this time, however, designated representatives from this unit for each PPFG are involved in the bi-weekly group meetings. Each is responsible to provide feedback to all customer service representatives as a result of the meetings.

**Primary Role of Ombudsman:**

The primary role of the Ombudsman continues to be education and the information source between the DMERC Region And supplier community. The Provider Customer Service Unit and ARU system have both been strengthened to accommodate providers needs. The supplier community has been directed to contact this unit as a first recourse for resolution to your questions/issues. The cooperation of the supplier community has enabled the Ombudsmen to concentrate on our true responsibilities, such as educational workshops and materials; attending trade shows & association meetings; conference calls; physician education; beneficiary education and resolution of issues affecting all suppliers. It has also enabled us to develop and implement the P/PPFG's to improve our over-all service to the supplier and beneficiary community.

**Product/Process Groups  
(717) 735-9665**

<b>Respiratory</b>	<b>Mobility</b>
<p>Michele Healey - Ombudsman – Primary Doris Spencer - Ombudsman – Secondary Kevin Quaglia - PR Representative</p> <ul style="list-style-type: none"> <li>- Oxygen Supplies/Equipment</li> <li>- Nebulizers</li> <li>- CPAP/BIPAP</li> <li>- Suction Pumps</li> <li>- Tracheostomy Supplies</li> <li>- IPPB</li> <li>- Ventilators</li> </ul>	<p>Laura Viot - Ombudsman - Primary TBA - Ombudsman - Secondary Erin Groblewski - PR Representative</p> <ul style="list-style-type: none"> <li>- Wheelchairs</li> <li>- Walkers</li> <li>- Canes/Crutches</li> <li>- Repairs/DME</li> <li>- Seat Life Mechanisms</li> <li>- Powered Operated Vehicle</li> <li>- Seating Systems</li> </ul>

<p style="text-align: center;"><b>Orthotics &amp; Prosthetics</b></p> <p>Doris Spencer - Ombudsman - Primary Michele Healey - Ombudsman - Secondary Kevin Quaglia - PR Representative</p> <ul style="list-style-type: none"><li>- Lower/Upper Limb Orthosis</li><li>- Spinal Orthosis</li><li>- Lower/Upper Limb Prosthesis</li><li>- Orthopedic Footwear</li><li>- Diabetic Shoes</li><li>- Orthotic/Prosthetic Repair</li><li>- Dynamic Splints</li></ul>	<p style="text-align: center;"><b>Supports</b></p> <p>Thomas O'Connor - Ombudsman - Primary Amy Capece - Ombudsman - Secondary Erin Groblewski - PR Representative</p> <ul style="list-style-type: none"><li>- Hospital Beds/Accessories</li><li>- Trapeze Bars</li><li>- Commodes/Bed Pans/Urinals</li><li>- Support Surfaces</li><li>- Patient Lifts</li><li>- Traction</li></ul>
<p style="text-align: center;"><b>Nutrition/Pharmacy</b></p> <p>Amy Capece - Ombudsman - Primary Thomas O'Connor - Ombudsman - Secondary Kevin Quaglia - PR Representative</p> <ul style="list-style-type: none"><li>- Enteral Nutrition</li><li>- Parenteral Nutrition</li><li>- Immunosuppressive Drugs</li><li>- Infusion Pumps</li><li>- Dialysis Equipment/Supplies/EPO</li><li>- Oral Anti-Cancer</li><li>- Oral Antiemetic</li></ul>	<p style="text-align: center;"><b>Specialized DME</b></p> <p>TBA - Ombudsman - Primary Laura Viot - Ombudsman - Secondary Erin Groblewski - PR Representative</p> <ul style="list-style-type: none"><li>- Heat/Cold Application</li><li>- CPM &amp; Neuromuscular Stimulator</li><li>- TENS &amp; Osteogenic Bone Stimulator</li><li>- Vision - Lenses &amp; Prosthesis</li><li>- Impotence Aid</li><li>- Voice Prosthesis</li><li>- Ostomy &amp; Urologicals</li><li>- Surgical Dressings</li><li>- Breast Prosthesis</li><li>- Maxillofacial/Miscellaneous DME</li><li>- Lymphedema Pumps</li><li>- Investigational Devices</li><li>- Glucose Monitors</li></ul>

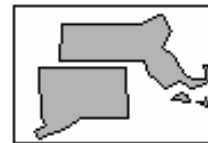
**Reminder:** The *Secondary* Ombudsman serves as backup/support to the *Primary* Ombudsman for the product category.

**Professional Relation Ombudsmen**

PR Representatives  
Erin Groblewski, Kevin Quaglia



**ME, NH, RI, VT**  
**Area Codes:**  
**207, 401, 603, 802**  
Michele Healey  
State Association  
NEMED

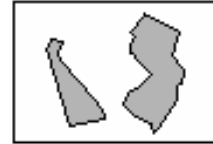


**MA, CT**  
**Area Codes:**  
**203, 413, 508, 617, 860**  
Doris Spencer  
State Association  
NEMED

**NY State**  
**Area Codes:**  
**315, 518, 607, 716, 914**  
Laura Viot  
State Association  
NYMEP



**NY City and Long Island**  
**Area Codes**  
**212, 516, 718, 917**  
Tom O'Connor  
State Association  
NYMEP



**PA**  
**Area Codes:**  
**215, 412, 610, 717, 814**  
Amy Capece  
State Association  
PAMS

**NJ, DE**  
**Area Codes:**  
**201, 302, 609, 908**  
TBA  
State Association  
JAMES

**Supplier Notice 97-24**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: July 25, 1997

**Billing Clarifications - Surgical Dressings**

A significant number of claims with identical HCPCS codes and dates of service are being billed on two separate claim lines. Recently, we have seen this billing practice for a large number of surgical dressing claims.

When duplicate HCPCS codes and dates of service are billed on two separate claim lines, one of the claim lines will be denied CO-18.

\* CO-18 Contractual obligations, duplicate claim/service

In order to prevent this denial, duplicate HCPCS codes and dates of service must be combined on one claim line. The following example illustrates the incorrect and correct way these claims should be billed:

<b>Example</b>	<b>Dates(s) of Service</b>	<b>CPT/HCPCS</b>	<b>Modifier</b>	<b>\$Charges</b>	<b>Days or Units</b>
<i>Incorrect</i>	2/28/1997	A6406	X5	\$80.00	400
	2/28/1997	A6406	X5	\$90.00	400
<i>Correct</i>	2/28/1997	A6406	X5	\$170.00	800

By billing under the correct example, you will not receive a CO-18 denial. However, Medicare guidelines and medical policy coverage criteria must be met to allow any payment of the claim.

We are also receiving a great number of surgical dressing claims that are being submitted with more than one "X" modifier on one claim line. These claims will be denied CO-B18.

\* Contractual obligations, claim/service denied because this procedure code/modifier CO-B18 was invalid on the date of service or claim submission.

<b>Example</b>	<b>Dates(s) of Service</b>	<b>CPT/HCPCS</b>	<b>Modifier</b>	<b>\$Charges</b>	<b>Days or Units</b>
<i>Incorrect</i>	2/28/1997	K0402	X3X1	\$50.00	200

Please refer to the surgical dressing policy for the correct usage of the "X" modifiers.

**Supplier Notice 97-23**

To: Region A Supplier Community  
 From: Region A DMERC - Professional Relations  
 Date: July 17, 1997

**Fall 1997 Continuing Education Workshops**

Region A DMERC Region Announces the Fall 1997 continuing education workshops. The topics for this session are: Mobility, Parenteral and Enteral Nutrition (PEN), Documentation/CMN, and Electronic Data Interchange (EDI). During these sessions, suppliers will have the opportunity to receive information and instruction on each topic. **Workshop materials and lunch will be provided.**

**WORKSHOP DATES and LOCATIONS**

<b>Date</b>	<b>City/State</b>	<b>Location</b>	<b>Phone</b>
Sept. 8	Portland, ME	Holiday Inn by the Bay Hotel & Convention Center 88 Spring St.	(207) 775-2311
Sept. 12	Bedford, NH	Sheraton Wayfarer Inn 121 South River Road	(603) 622-3766
Sept. 15	Worcester, MA	Holiday Inn Crowne Plaza 10 Lincoln Square	(508) 791-1600
Sept. 19	Pittsburgh, PA	Marriott Greentree 101 Marriott Drive	(412) 922-8400
Sept. 22	East Elmhurst, NY	Holiday Inn Crowne Plaza 104-04 Ditmars Blvd.	(718) 457-6300
Sept. 24	Albany, NY	Albany Marriott 189 Wolf Road	(518) 458-8444
Sept. 29	Amhearst, NY	Buffalo Marriott 1340 Millersport Hwy.	(716) 689-6900
Oct. 6	King of Prussia, PA	Sheraton Valley Forge 1160 First Ave.	(610) 337-2000
Oct. 8	East Fairfield, NJ	Radisson Hotel & Suites 690 Route 46 East	(201) 227-9200
Oct. 14	Hartford, CT	Sheraton Hartford 315 Trumbull St.	(860) 728-5151
Oct. 17	Scranton, PA	Radisson Lackawana Station 700 Lackawana Avenue	(717) 342-8300

**Parking information:** When reserving workshop facilities, we do our best to choose locations with ample, cost-free parking. Unfortunately, cost-free parking is not always available. Please phone the meeting facility for specific information regarding location and possible parking fees.

**WORKSHOP AGENDA**

Registration	8:30 a.m. - 9:00 a.m.	
Specialty Workshops	9:00 a.m. - 12:00 p.m.	<b>Mobility Parenteral and Enteral Nutrition (PEN) Documentation/CMNs:</b> Review and Hearing Processes, Orders, Additional Documentation <b>Electric Data Interchange</b>
Lunch	12:00 p.m. - 1:00 p.m.	
Specialty Workshops	1:00 p.m. - 4:00 p.m.	<b>Mobility Parenteral and Enteral Nutrition (PEN) Documentation/CMNs:</b> Review and Hearing Processes, Orders, Additional Documentation <b>Electric Data Interchange</b>

**HOW TO REGISTER**

Complete the following registration form and make checks payable to United HealthCare. Return completed form to United HealthCare, Region A DMERC, using the appropriate address as listed below. The registration fee of **\$60.00** per person is **non-refundable**.

**ALL ATTENDEES MUST BE PRE-REGISTERED AND REGISTRATIONS PAID IN ADVANCE.**

**Due to limited space, registration is on a first come, first serve basis. In the event that particular specialty workshop is filled to capacity, you will be notified by telephone and given the opportunity to make another selection.**

**ONCE REGISTRATION IS COMPLETE, NO CHANGES WILL BE MADE. PLEASE MAKE YOUR SPECIALTY WORKSHOP SELECTION VERY CAREFULLY.**

**September 01, 1997 - Portland, ME; Bedford, NH; Worcester, MA; Pittsburgh, PA**

**September 08, 1997 - East Elmhurst, NY; Albany, NY; Amhearst, NY**

**September 18, 1997 - King of Prussia, PA; E. Fairfield, NJ; Hartford, CT; Scranton, PA**

All registrations **must be postmarked** by the dates listed above for those workshops. Any registration that we receive postmarked after those dates will not be accepted and will be returned to those Suppliers.

**REGULAR MAIL**

Attn. Workshop Registration  
United HealthCare  
Region A DMERC  
PO Box 6800  
Wilkes-Barre, PA 18773-6800

**OVERNIGHT DELIVERY**

Attn. Workshop Registration  
United HealthCare  
Region A DMERC  
60 East Main Street  
Nanticoke, PA 18634

*The DMERC reserves the right to cancel any workshop. If this occurs, you will be notified and your registration fee will be refunded.*

**NOTE:** *If you do not receive your confirmation within 5 days of the workshop you have registered for, please call our Professional Relations Unit at (717) 735-9406.*

**REGISTRATION FORM**  
**Please complete a registration form**  
**for each person attending.**

Company Name \_\_\_\_\_  
Provider Number \_\_\_\_\_  
Submitter Number (Billing Services only) \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_  
City & State of Workshop you Wish to Attend \_\_\_\_\_  
Number Attending \_\_\_\_\_ Amount Enclosed \_\_\_\_\_  
Name of Attending \_\_\_\_\_  
Contact Name \_\_\_\_\_

**Please check the appropriate box(es) to**  
**indicate which workshops you wish to attend:**

**A.M. Session (9:00 a.m. - 12:00 p.m.)**

**P.M. Session (1:00 p.m. - 4:00 p.m.)**

Mobility

Mobility

PEN

PEN

Documentation

Documentation

EDI

EDI

Will be attending luncheon

Will be attending luncheon

**Supplier Notice 97-22**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: April 30, 1997

**1997 Allowable for Prosthetic & Orthotic Code L6806**

The 1997 allowable for code L6806 (Terminal Device, Hook, TRS Grip, Grip III, VC, or equal) is as follows:

CT	\$1,167.12
DE	\$1,167.12
MA	\$1,167.12
ME	\$1,167.12
NH	\$1,167.12
NJ	\$1,167.12
NY	\$1,167.12
PA	\$1,167.12
RI	\$1,167.12
VT	\$1,167.12

**Supplier Notice 97-21**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: April 30, 1997

**HCFA's Internet Homepage Regarding Medicare Electronic Data Interchange**

HCFA's Internet Homepage now has information about Medicare Electronic Data Interchange (EDI). The material includes facts about Medicare EDI, advantages to using Medicare EDI, news and updates in Medicare EDI, descriptions of Medicare EDI formats, and EDI formats to download. In addition, the material contains HCFA instructions for completing both the paper UB-92 and HCFA-1500 forms.

EDI customers now have two options for accessing this material from HCFA Central Office: the Internet or the BPO Bulletin Board (410-786-0215).

To access this material on the Internet, enter the URL address:

<http://www.hcfa.gov/medicare/edi/edi.htm>

Another method for accessing this material is by entering the URL address:

<http://www.hcfa.gov>

This will take you to the HCFA Homepage. click on Medicare, then click on Professional/Technical Information. On the Professional/Technical Information page, click on Electronic Data Interchange (EDI).

If you have any questions, please call your regional office representative.

**Supplier Notice 97-20**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: April 4, 1997

**Admission to Spring '97 Workshops**

All attendees for the spring '97 continuing education workshops **must** be pre-registered. No one will be admitted to the workshops without being pre-registered and confirmation cards must be shown for admittance to the workshop.

**There will be no registrations taken at the door on the day of the workshops. The registration deadlines were March 25, 1997 for New York State, April 1, 1997 for Pennsylvania and New Jersey, and April 16, 1997 for All New England Workshops. All registrations had to be postmarked by the dates listed above for the workshops.**

**Supplier Notice 97-19**

To: Region A Supplier Community  
 From: Region A DMERC - Professional Relations  
 Date: April 4, 1997

**Proper Completion of HCFA 1500 Block 25 & 33**

As a reminder to the supplier community, block 33 of the HCFA 1500 form **must** contain the following information: physician/supplier's billing name, address, city, state, zip code, phone and supplier number. Block 25 **must** contain the Federal Tax ID Number (EIN) that corresponds with the information in block 33.

The information placed in blocks 25 and 33 must be identical to that on file with the National Supplier Clearinghouse (NSC). Supplier information must coincide with the location where the service was rendered. If this information is different in any way, your claim will be denied with the following:

619	-	We cannot process this claim because you did not complete or enter the correct physician/supplier's Medicare number, billing name, address, city, state, zip code, and phone number.
CO	-	Contractual Obligations
16	-	Claim/service lacks information that is needed for adjudication.
M82	-	Did not complete or enter the correct physician/supplier's Medicare number or billing name, address, city, state, zip code and phone number.

Any changes to your Federal Tax ID Number, billing name, address, city, state, zip code, and phone number must be reported to the NSC **immediately**. The NSC can be reached at 803-754-3951 or by writing to:

Palmetto Government Benefits Administration  
 National Supplier Clearinghouse  
 PO Box 100142  
 Columbia SC 29202-3142

**Please note:** A copy of the NSC Change of Address Notification form was published in the March 1997 "DME Medicare News", No. 33, Page 40.

**Supplier Notice 97-18**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: April 4, 1997

**Enteral Nutrition Services**

**This notice is to suppliers who bill EMC for Enteral Nutrition Services.**

When submitting an initial claim with supporting documentation for a pump, we recommend that you include that information in the HA0 record for each line of the claim. This will allow us to process your claims more accurately.

If you have any questions regarding the above information, please contact the EMC Unit at (717) 735-9429.

**Supplier Notice 97-17**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: March 27, 1997

**Nebulizer Drug Allowances**

Attached are the allowances for the new K codes for inhalation solutions and a revised allowance for code J7051. These K codes are valid for dates of service on or after April 1, 1997. The previous J codes for inhalation solutions (J7610-J7675) will be invalid for claim submission to the DMERC for dates of service on or after April 1, 1997. However, these J codes will continue to be valid for dates of service prior to April 1, 1997, regardless of the date of claim submission.

Suppliers should refer to the Definitions and Coding Guidelines sections of the DMERC Nebulizer policy for information about the correct use of the new codes and modifiers. In particular, remember that when two or more drugs are combined by a pharmacist and dispensed to the patient in the same unit dose container, the KP and KQ modifiers used with the unit dose form codes must be selected so that the combination yields the lowest cost to the beneficiary.

**Supplier Notice 97-16**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: March 20, 1997

**Attention Vision Suppliers**

Due to low registration, the vision portion of the Spring '97 Continuing Education Workshop has been canceled.

Registrants for the vision session will be contacted by the Professional Relations unit concerning refund arrangements. All other vision suppliers in need of education should contact their Ombudsman.

**Supplier Notice 97-15**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: February 24, 1997

**Correction to Supplier Notice 96-56**

**Claims for wheelchair accessories will be denied when there is no record of the patient owning a wheelchair base.**

Documentation as to the date purchase of a wheelchair base should be provided with the claim for the accessories being billed.

This documentation will be considered for payment of the accessories when there is no record of a wheelchair base on the beneficiaries Medicare records.

**Supplier Notice 97-14**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: February 24, 1997

**Correction to Supplier Notice 96-50**

The following is a reminder when billing for codes K0115 - K0116, which can be found in the wheelchair policy section of the Region A Supplier Manual.

Claims for codes K0115 - K0116 must be submitted hard copy. Documentation must include the patient's diagnosis and description of the spinal problem, a description of the features of the orthosis and medical necessity of each, and an explanation of why a seating system alone and/or a prefabricated spinal orthotic is not adequate for the patient. There must be a statement of the number of hours per day that the patient is expected to be in the wheelchair. If the orthotic has a brand name/model number, that should be stated. If not, the claim should include a photograph of the device, a brief description of materials used, and an estimate of the fabrication time.

If you are an EMC submitter: Hard copy documentation must be submitted 48 hours prior to claim submission. This information can be faxed to:

**(717) 735-9643**

**Attn.: Michelle Baranski**

Please Note:

Text in bold print represents revision to previous supplier notice.

**Supplier Notice 97-13**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: February 14, 1997

**Correction to Supplier Notice 97-07**

Supplier Notice 97-07, Spring '97 Continuing Education Workshops, contained a typographical error in the times for Workshops 3 & 4. The correct times for those workshops to begin is **2:00 p.m.** not 1:30 p.m. as printed.

**Supplier Notice 97-12**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: February 12, 1997

**Bulletin Board System (BBS) Availability**

The bulletin board system is available for transmission of claims 7 days a week with the following exceptions:

- 12 midnight to approximately 6 a.m.\*\*
- 7 a.m. to approximately 8 a.m.
- 1 p.m. to approximately 2 p.m.

\*\*This time may vary due to maintenance needs.

**Supplier Notice 97-11**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: February 12, 1997

**Billing Reminder - "From" and "To" Dates**

This notice is a reminder to our electronic billers. The Region A DMERC recently published a list of the most common errors we find with electronic billing submissions in the December 1996 "DME Medicare News." The third item on this list are service dates (FA0 5.0 & 6.0) for capped rental items. We continue to receive electronic claims with different "from" and "to" dates for capped rental items. When billing electronically for these items, the "from" and "to" service dates should be the same. The number of services should be one.

Please review pages 25 and 26 of the December 1996 "DME Medicare News" for the complete list of common errors with electronic billing.

**Supplier Notice 97-10**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: February 12, 1997

**Correction – Coding**

The December 1996 issue of the "DME Medicare News" (page 7) contained an error for code A4321. Under "New Codes for 1997" the code A4231 is incorrectly listed for the descriptor--Therapeutic agent for urinary catheter irrigation. The correct code is **A4321--Therapeutic agent for urinary catheter irrigation.**

**Supplier Notice 97-09**

To: Region A Supplier Community  
 From: Region A DMERC - Professional Relations  
 Date: February 7, 1997

**Clarification for Billing Deluxe Frames**

The following example is the correct way to bill for deluxe frames that cost \$150.00. In this example the standard frames would have cost \$50.00. The deluxe frames were provided on 12/1/96.

<b>Block 24A Date of Service</b>	<b>Block 24D Procedure/HCPCS</b>	<b>Block 24 \$Charges</b>	<b>Block 24G Days or Units</b>
12/1/1996	V2020	\$50.00	1
12/1/1996	V2025	\$100.00	1

The procedure code V2020 with the submitted charge represents the charge for standard frames, which is a covered service when the coverage criteria as outlined in the refractive lens policy is met. The procedure code V2025 with the charge submitted of \$100.00 represents the difference between the cost for the deluxe frames and the standard frames. The \$100.00 charge for the deluxe frames will be denied with remark code PR-46, for both assigned and nonassigned claims.

PR - Patient Responsibility

46 - This (these) service(s) is (are) not covered

Billing the total charge of \$150.00 under procedure code V2025 is incorrect and will be denied. By following the above example, the Medicare allowance for the least costly alternative, the standard frames (V2020) can be made and the difference for the deluxe frames (V2025) can be charged to the patient.

**Supplier Notice 97-08**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: February 6, 1997

**Electronic Remittance Notices (ERN)**

Attention: Suppliers Receiving Electronic Remittance Notices (ERN)

Effective, February 10, 1997 ERN's will be available on the remittance BBS (717) 735-9451 for a period of 10 days. After 10 days the ERN files will be deleted from the system and will not be recreated. Please note, if you have problems downloading you must contact your software vendor immediately. Team EMC will work with your vendor to help resolve these problems **within the 10 day period**. If you have any questions regarding this policy, please contact the EMC Help Desk at (717) 735-9429.

**Supplier Notice 97-07**

To: Region A Supplier Community  
 From: Region A DMERC - Professional Relations  
 Date: February 6, 1997

**Spring 1997 Continuing Education Workshops**

The Region A DMERC is providing a series of one-day Continuing Education Workshops for the Supplier Community. The topics for this round of workshops are: Nebulizer/Oxygen, Surgical Dressing/Urological Supplies, Vision, and Basic Billing/CMNs. Workshop materials and lunch will be provided.

**WORKSHOP DATES and LOCATIONS**

Date	City/State	Location	Phone
April 7	Rochester, NY	Rochester Marriott Thruway 5257 W. Henrietta Road	(716) 359-1800
April 9	Saratoga Springs, NY	Sherton Saratoga Springs Hotel and Conference Center 534 Broadway	(518) 584-4000
April 11	East Elmhurst, NY	LaGuardia Marriott 102-05 Ditmars Blvd.	(718) 565-8900
April 14	Greensburg, PA	Sherton Inn Greensburg 100 Sherton Drive, Rte. 30 East	(412) 863-6060
April 16	Cherry Hill, NJ	Sherton Inn Cherry Hill 1450 Route 70 East, NJ Rte. 70 & I-295	(609) 428-2300
April 18	Sayer, PA	Guthrie Inn & Conference 255 Spring St	(717) 888-7711
April 23	Atlantic City, NJ	Resorts Casino Hotel 1133 Boardwalk	(609) 344-6000
April 28	Wilkes-Barre, PA	East Mountain Inn 2400 East End Blvd	(717) 822-1011
April 28	Portland, ME	Holiday Inn By the Bay Hotel and Conference Center 88 Spring St	(207) 775-2311
April 30	West Lebanon, NH	Radisson Inn - North Country Interstate 89 Exit 20 @ Airport Road	(603) 298-5906
May 2	Milford, MA	Radisson Hotel Milford 11 Beaver St	(508) 478-7010
May 5	Hartford, CT	Sherton Hartford 315 Trumbull St	(230) 728-5151

**Parking information:** When reserving workshop facilities, we do our best to choose locations with ample, cost-free parking. Unfortunately, cost-free parking is not always available. Please phone the meeting facility for specific information regarding location and possible parking fees.

**WORKSHOP AGENDA**

Registration	8:30 a.m. - 9:00 a.m.	
Workshop 1	9:00 a.m. - 12:30 p.m.	Nebulizer/Oxygen Policies
Workshop 2	9:00 a.m. - 12:30 p.m.	Surgical Dressing/Urological Supplies
Lunch	12:30 p.m. - 1:30 p.m.	
Informal Discussion	1:30 p.m. - 2:00 p.m.	General Updates

Workshop 3	1:30 p.m. - 4:00 p.m.	Vision
Workshop 4	1:30 p.m. - 4:00 p.m.	Basic Billing/CMNs

**TO REGISTER**

Complete the following registration form and return it to United HealthCare, Region A DMERC, with the appropriate **NON-REFUNDABLE** registration fee of **\$50.00 per person**.

Make checks payable to United HealthCare and mail with your completed registration form to the addresses below. The deadlines for registration are as follows:

- March 25, 1997 - All New York State Workshops
- April 1, 19997 - All Pennsylvania Workshops and New Jersey Workshops
- April 15, 1997 - All New England Workshops

All registrations must be postmarked by the dates listed above for those workshops. Any registration that we receive postmarked after those dates will not be accepted and returned to those Suppliers.

**REGULAR MAIL**

**OVERNIGHT DELIVERY**

Attn. Workshop Registration  
United HealthCare  
Region A DMERC  
PO Box 6800  
Wilkes-Barre, PA 18773-6800

Attn. Workshop Registration  
United HealthCare  
Region A DMERC  
60 East Main Street  
Nanticoke, PA 18634

*The DMERC reserves the right to cancel any workshop. If this occurs, you will be notified and your registration fee will be refunded.*

**NOTE:** *If you do not receive your confirmation within 5 days of the workshop you have registered for, please call our Professional Relations Unit at (717) 735-9406.*

**REGISTRATION FORM**  
**Please complete a registration form**  
**for each person attending.**

Company Name \_\_\_\_\_  
Provider Number \_\_\_\_\_  
Submitter Number (Billing Services only) \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_  
City & State of Workshop you Wish to Attend \_\_\_\_\_  
Number Attending \_\_\_\_\_ Amount Enclosed \_\_\_\_\_  
Name of Attending \_\_\_\_\_  
Contact Name \_\_\_\_\_

**Please check which workshops you wish to attend:**

- Workshop 1 - Nebulizer/Oxygen
- Workshop 2 - Surgical Dressings/Urological Supplies
- Workshop 3 - Vision
- Workshop 1 - Basic Billing/CMNs

**Supplier Notice 97-06**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: January 23, 1997

**The BBS Questionnaire System**

An electronic inquiry system has been implemented on the EMC Bulletin Board System. This system will allow suppliers to direct questions and inquiries to various departments of the DMERC Region And receive a response in a timely manner. Currently there are question forms for MSP/Accounting and the Professional Relations Departments. This list will be expanding to include other departments at our office. The questionnaires can be found under menu pick <1> Ask the DMERC. If you have a question for a department that is not currently listed you may use the BBS General Mail Messages to forward your question. The alternative message system may be found under menu pick option Ask the E-Team.

Messages left on the Bulletin Board will be responded to within 48 hours (2 working days). Please feel free to use the questionnaires as an alternative form of correspondence with the DMERC, and use them as often as needed.

Any questions you may have regarding "Ask the DMERC" option may be directed to us via the BBS mail system or by calling the EMC Unit.

**Supplier Notice 97-05**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: January 23, 1997

**EMC Help Desk Hours**

Effective Monday, January 27th, the EMC Help Desk hours will be 8:00 a.m. to 4:00 p.m., Monday through Friday. You may reach the EMC Help Desk at (717) 735-9429 during normal business hours.

**Supplier Notice 97-04**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: January 23, 1997

**New Remittance BBS**

Effective February 10, 1997 suppliers, billing services, and clearinghouses that currently retrieve Electronic Remittance Notice files and Weekly Status files from the Bulletin Board System (BBS) must retrieve them from our new Remittance BBS. The new dial-up number is (717) 735-9451. This new Remittance BBS has been implemented to help improve system performance of the Production BBS and relieve phone line congestion from the Production BBS. The new Remittance BBS is strictly for the retrieval of Electronic Remittance Notice files and Weekly Status files. No upload or message privileges will be granted on this BBS. On February 10, 1997 the Production BBS will no longer provide new Electronic Remittance Notice files and Weekly Status files and will delete all current files by Friday February 14, 1997. The Remittance BBS has been running since January 13, 1997 and is currently up to date with remittance information. Please convert as soon as possible. You will continue to use the Production BBS to send claim files, retrieve acknowledgment files and use the messaging options to communicate with the DMERC. If you have any questions regarding the new Remittance BBS or ERN and Weekly Status files please contact the EMC Help Desk at (717) 735-9429.

### Supplier Notice 97-03

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: January 17, 1997

### Claim Status Inquiries

Did you know our office is able to obtain **unlimited** claims status information via our Audio Response Unit (ARU)? Currently, if your office calls our telephone representative for claims status inquiry you are limited to 3 inquiries per telephone call. **Effective January 20, 1997, all claims status inquiries will be handled through the Audio Response Unit (ARU) which accommodates unlimited claim status inquiries.** By using the ARU for claim status inquiries, our telephone representatives will be more readily available to assist your office with more complex questions regarding Medicare. If your office requests claim status inquiries from a telephone representative, you will be referred to our Audio Response Unit for this information. To access our ARU call (717) 735-9445.

The ARU is simple to use and can be accessed from 7:00 a.m. to 12:00 a.m., Monday through Friday. The system provides ongoing instructions to help you with your selections. When you become familiar with the ARU, you can move more quickly through the script and skip the recording.

Before calling the ARU please have the following information:

- your 10-digit Medicare supplier number (NSC number)
- patient's Medicare number (health insurance claim #)
- date of service

Other options available for EMC submitters are:

- On-line Claim Status

On-line claim status will allow you to check on assigned claim status, Monday - Friday, 8:00 a.m. to 4:15 p.m., through the Advantis Network.

- Weekly Status Report

This report is available through the toll number on the Bulletin Board System (BBS).

Weekly status report shows all the assigned pending claims that are processing in our system. The report is updated weekly, and is available every Monday.

If you would like to be set up for either of these options, please contact our EMC Help Desk at (717) 735-9519, 9532, 9528, 9517, until January 22, 1997. After January 22, the EMC Help Desk number will be changed to (717) 735-9429.

**Supplier Notice 97-02**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: January 17, 1997

**EMC Help Desk Number Changed**

Effective Thursday, January 23, 1997, the EMC Help Desk phone number will be (717) 735-9429.

**Please note:** In the event that you dial the old EMC phone numbers, (717) 735-9519, 735-9528, 735-9532, 735-9517, your call will automatically be routed to the new Help Desk phone number.

**Supplier Notice 97-01**

To: Region A Supplier Community  
From: Region A DMERC - Professional Relations  
Date: January 9, 1997

**Supplier Notices**

Effective Monday, January 13, 1997 Mail Bulletins that are provided to the supplier community via the Bulletin Board System (BBS) will only be available for 6 months from the date of issue. After receiving a new message on the BBS, we suggest that you print a copy for your records. This new procedure will significantly reduce the logon time required to reach the main menu.