

DME MAC Jurisdiction A

Utilizing the Interactive Voice Response System to Check for Same/Similar DMEPOS Items

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During the intake process, and prior to dispensing or delivering the item, suppliers should ask the beneficiary if they have purchased or are currently renting the same or similar equipment, from another supplier. Additionally, suppliers should evaluate the patient's Medicare claims payment history to determine if there is record of the beneficiary's purchase or rental of same or similar equipment. If the patient's Medicare claims payment history reveals that the same or similar equipment was previously purchased or rented, suppliers should then determine what happened to the equipment previously purchased or rented by the beneficiary (i.e., was the equipment lost, stolen, irreparably damaged, etc.)

Suppliers may also utilize the Vips Provider Inquiry (VPIQ) system to determine if same/similar items are on file within the contractor's files, or suppliers may use the interactive voice response (IVR) system to check for same or similar HCPCS codes on file locally within the Jurisdiction A records or within the Common Working File (CWF). Suppliers may obtain the information through the IVR by selecting the same or similar option from the main menu, which is option 7. The same or similar option only provides information on base codes, not related accessories or drugs. For example, if a beneficiary has a manual wheelchair (K0001) and leg rests (K0195), the same or similar option only provides equipment that is same or similar for the K0001. No information will be given on the K0195. The Certificate of Medical Necessity option is still available which can give accessories and/or drugs related to a base code, which is option 3 from the main menu. Although some items do not require a CMN, the IVR system can still search for same or similar items if the item is classified as a capped rental item, frequent and substantially serviced item, an inexpensive and routinely purchased item, or if the item requires a CMN or Durable Medical Equipment Information Form (DIF).

For prosthetics, orthotics, and supplies, **the beneficiary must provide verbal authorization to a customer service representative (CSR) to release protected health information to the supplier or other healthcare representative.** Items in the prosthetic, orthotic, and supplies categories include the following:

- Diabetic supplies
- Therapeutic shoes
- Ankle/foot orthosis
- Knee orthosis
- Cervical traction devices
- External breast prosthesis
- Eye prosthesis
- Facial prosthesis
- Lower limb prosthesis
- Orthopedic footwear
- Refractive lenses
- Ostomy supplies
- Tracheostomy supplies
- Surgical dressings
- Urological supplies

If a beneficiary wishes to provide verbal authorization, the supplier must contact a customer service representative at 866-590-6731 *with the beneficiary on the line* and meet the applicable disclosure requirements.

For additional requirements regarding disclosure of beneficiary specific information please refer Chapter 2, Section 30 of CMS IOM Pub. 100-04, *Medicare Contractor Beneficiary and Provider Communications Manual*, <http://www.cms.hhs.gov/manuals/downloads/com109c02.pdf>.

It is the supplier's responsibility to be aware of the reasonable useful lifetime provisions for the items they routinely bill. If the patient has the same or similar piece of equipment in their Medicare claim payment history and the item has not reached its reasonable useful lifetime period, claims billed for the same or similar item will deny. Same/similar equipment denials are considered medical necessity denials and over utilization of services being billed. Although the item is not denied based on the local coverage determination, the claim is denied as unreasonable and necessary due to the existence of same or similar equipment in the patient's history. Therefore, suppliers may execute an ABN if there is reason to believe that an item or service may be denied as not medically necessary due to the patient having a same or similar piece of equipment. If an ABN is not properly executed and the claim denies suppliers are required to refund the beneficiary.

Note: *Suppliers are liable for CO denials. However, if the beneficiary chooses to obtain an item even though he or she already owns or rents the same or similar item, and the beneficiary accepts financial liability by signing the ABN, a PR denial will be issued assigning liability to the beneficiary.*

If a supplier believes a claim has been incorrectly denied for same/similar equipment, they should submit a request for redetermination.

Redetermination requests should be submitted to:

DME – Redeterminations
P.O. Box 9150
Hingham, MA 02043-9150