

KNOWLEDGE • RESOURCES • TRAINING

DMEPOS Accreditation







What's Changed?

- Replaced the National Supplier Clearinghouse (NSC) with 2 new National Provider Enrollment (NPE) contractors effective November 7, 2022 (page 3)
- Added clarifying information about reporting enrollment information changes (page 6)

You'll find substantive content updates in dark red.



This fact sheet describes DMEPOS suppliers' accreditation requirements, which includes verifying your business meets the required DMEPOS quality standards, types of eligible professionals exempted from accreditation, updating your enrollment information, and resources. This information applies to **all** DMEPOS suppliers submitting claims to Durable Medical Equipment Medicare Administrative Contractors (DME MACs) for Medicare patients' DMEPOS items and supplies.

DMEPOS Quality Standards & Accreditation Requirements

The National Supplier Clearinghouse (NSC) no longer processes DMEPOS suppliers' Medicare enrollment applications.

Since November 7, 2022, 2 new National Provider Enrollment (NPE) DMEPOS contractors (east and west) process Medicare enrollment applications for DMEPOS suppliers to make sure they meet all supplier standards and enrollment requirements.

Find your NPE contractor.

To supply Medicare DMEPOS to your patients and get and retain a supplier billing number, you must:

- Meet DMEPOS supplier standards.
 - Suppliers must comply with all current supplier regulatory standards to enroll in Medicare and keep their billing privileges through NPE contractors.
 - The NPE contractors validate suppliers meet all supplier standards, validate the supplier is
 properly accredited for the products and services they note on their enrollment application, and
 maintain a DMEPOS supplier enrollment central data information repository.
 - If a DMEPOS supplier violates any supplier standards, like not being appropriately licensed, the NPE contractors may deny enrollment or revoke your current Medicare billing privileges.
- Meet all CMS quality standards and get accreditation from a CMS-approved independent national accreditation organization (AO).
 - AO accreditation must indicate the specific products and services for which they're accrediting that supplier to get payment.
 - DMEPOS suppliers must notify their AO when a new DMEPOS location opens. All DMEPOS supplier locations, whether owned or subcontracted, must meet DMEPOS quality standards and get separately accredited to bill us.
 - DMEPOS suppliers must disclose all products and services when they enroll, including adding new product lines for which they're seeking accreditation. If you add a new product line after enrollment, you're responsible for notifying the accrediting body so they can re-survey you and accredit the new product line.
- Enroll in Medicare or change your enrollment using the paper application Medicare Enrollment
 Application for DMEPOS Suppliers (CMS-855S) or through PECOS.
 - All DMEPOS suppliers must report any enrollment information changes to NPE contractors
 within 30 days of the change, including DMEPOS accreditation changes.



We'll deny your claims if you aren't accredited by a CMS-approved AO. We'll tell you on your remittance advice if you aren't properly accredited. Contact an AO to get accredited. If you believe this message is incorrect:

- Review your enrollment to ensure your accreditation information is current. Find your NPE contractor for help changing your enrollment record.
- If your record is correct, ask your AO to check their records.

The DMEPOS Quality Standards educational tool has information on quality standards and resources.

See CMS-855S for a list of covered DMEPOS products and services.

For exempted products, supplies, and eligible professionals, see the table below.

Quality Standards

CMS-approved AOs use the <u>Quality Standards</u> guidelines to accredit suppliers. The <u>NPE contractors</u> and AOs are completely independent, so compliance with 1 entity doesn't guarantee compliance with the other.

Exemptions

The <u>Medicare Improvements for Patients and Providers Act of 2008</u> (MIPPA) exempts certain eligible professionals and other persons from accreditation unless we determine the quality standards specifically apply to them.

MIPPA also allows us to exempt eligible professionals and other persons from the DMEPOS quality standards based on their licensing, accreditation, or other applicable mandatory quality requirements. However, we don't currently use this statutory authority.

<u>Pharmacies</u> may also apply for an accreditation exemption by submitting an accreditation exemption attestation to the <u>NPE contractors</u>.



DMEPOS Accreditation

Exempted Products, Supplies, & Professionals

Exempted Categories	Exempted Products, Supplies, & Professionals
Products and Supplies	DME drugs (inhalation drugs and DME pump-infused drugs)
	Home health agencies' medical supplies
	Other Part B drugs, like immunosuppressive and antiemetic drugs
Eligible Professionals	Certified nurse-midwife
	Certified registered nurse anesthetist
	Clinical nurse specialist
	Clinical psychologist
	Clinical social worker
	Nurse practitioner
	Nutritional professional
	Occupational therapist
	Physical therapist
	Physician
	Physician assistant
	Qualified speech-language pathologist
	Registered dietitian
Other Persons	Optician
	Orthotist
	Prosthetist
	Qualified audiologist

Accreditation Process

Except for exempted suppliers listed in the table, you must have DMEPOS supplier accredited status **before** submitting your Medicare enrollment application.

The NPE contractors process enrollment applications and verify information but won't process any enrollment application unless the applicant is accredited or exempt. CMS-approved AOs accredit DMEPOS suppliers as compliant with Medicare Part B DMEPOS quality standards.

AOs

For accreditation information, contact an AO directly. We keep a <u>current list of</u> approved AOs with contact information.



The accreditation process has 3 stages:



Figure. Accreditation Process

Pre-Application Process

- You contact the AOs and get information about each organization's accreditation process
- You review the information and apply to the AO of your choice
- Your AO helps determine what required changes will ensure you meet accreditation standards (for example, modifying existing services and practices, developing appropriate policies and procedures, developing an implementation plan and timeline, and training employees)
- You apply for accreditation after you make the changes or during their implementation

Application Process

- You submit a completed application to the AO with all required supporting documentation
- The AO reviews your application and documentation (for example, verifies organizational chart and licensure) over a 4–6 month period

On-Site Survey

- The AO conducts an unannounced on-site survey
- The AO determines accreditation based on your submitted data and on-site survey results
- AOs report accreditation information to the NPE contractors
- You may also report accreditation information to your NPE contractor on your enrollment application

Remember: AOs conduct unannounced on-site surveys at least every 3 years.



Merger, Acquisition, or Sale

Accreditation doesn't automatically transfer after merger, acquisition, or sale. You **must** notify us, your **NPE** contractor, and your AO when a merger, acquisition, or sale happens.

It's important to keep your enrollment information current. To avoid having your Medicare billing privileges revoked, be sure to report any change within 30 days. Changes include, but aren't limited to:

- Change in ownership
- Adverse legal action
- Change in practice location

Resources

- DME Center
- DME MAC Contact Information
- DMEPOS Competitive Bidding
- DMEPOS Supplier Enrollment
- DMEPOS Supplier Standards
- HHS Office of Inspector General
- Physician Self-Referral Law (Stark Law) Considerations for DMEPOS Suppliers

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