

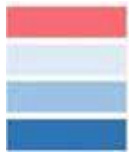


Fast Facts:

CMS Rule 1780 Final Rule & The Lymphedema Treatment Act

Frequently Asked Questions

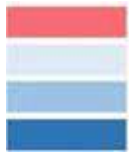
Question	Response
Where can I read the final rule?	https://public-inspection.federalregister.gov/2023-24455.pdf
Where can I find the HCPCS code list?	https://www.cms.gov/medicare/coding-billing/healthcare-common-procedure-system/quarterly-update
Will the HCPCS change for commercial insurance?	HCPCS are generally adopted as the standard across most payers. But individual commercial insurance plans may decide to still use the S codes, which will be invalid for Medicare use.
When will the fee schedule be published?	The fee schedule has been published here: https://www.cms.gov/medicare/payment/fee-schedules/dmepos/dmepos-fee-schedule
Will lymphedema compression treatment items be placed in the Competitive Bidding Program?	CMS has the authority to do so, but has not yet elected to use this authority now or in the near future.
Do I have to be DMEPOS enrolled to bill Medicare?	Yes.
Can clinicians become DMEPOS suppliers?	Yes.
I have a question about DMEPOS enrollment	Please visit: https://www.cms.gov/medicare/enrollment-renewal/providers-suppliers/durable-medical-equipment-prosthetics-orthotics-supplies-dmepos
When is CMS going to update the DMEPOS enrollment process to reflect lymphedema compression items and supplies?	Please contact the National Provider Enrollment contractors with questions: https://www.cms.gov/medicare/enrollment-renewal/providers-suppliers/chain-ownership-system-pecos/medicare-enrollment-assistance-contacts
Where do I find DMEPOS enrolled suppliers?	https://www.medicare.gov/medical-equipment-suppliers



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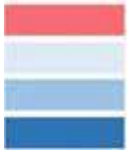
Question	Response
I have a question about how to bill Medicare	Please contact the DME MAC in your geographical jurisdiction: https://www.cms.gov/medicare/coding-billing/medicare-administrative-contractors-macs/who-are-macs
I have a question about how to bill a Medicare patient	Please contact the DME MAC in your geographical jurisdiction: https://www.cms.gov/medicare/coding-billing/medicare-administrative-contractors-macs/who-are-macs Additional resource: https://med.noridianmedicare.com/web/jeb/topics/dme
I have a question about ABNs	Please visit: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ABN-Tutorial/formCMSR131tutorial111915f.html
I have a question about how to bill other insurance plans or patients with insurance plans other than Medicare	Please contact the specific payer's claims and billing department.
What about compression bras?	There were three HCPCS codes published with bra in the description: <ul style="list-style-type: none">• A6528 Gradient compression garment, bra, for nighttime use, each• A6529 Gradient compression garment, bra, for nighttime use, custom, each• A6589 Gradient pressure wrap with adjustable straps, bra, each
Will all brands of products be covered?	Medicare has not identified specific brands for coverage.
Will products be sold in pairs or units?	The HCPCS are labeled as "each", so they must be billed as individual units
Is Medicare paying a separate fitting fee?	No. DMEPOS suppliers are responsible for all aspects of furnishing the item, including fitting, and measuring services.
Will phlebotymphedema and/or lipedema be covered?	CMS stated "we are finalizing the proposed rule to limit the scope of the new benefit for lymphedema compression treatment items to items furnished to an individual with a diagnosis of lymphedema and not illnesses other than lymphedema."



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What is Medicare going to cover?	<p>CMS has shared this: https://www.cms.gov/medicare/payment/fee-schedules/dmepos-fee-schedule/lymphedema-compression-treatment-items</p> <p>And a joint publication from the DME MACs is available here: https://med.noridianmedicare.com/web/jadme/article-detail/-/view/6547796/lymphedema-compression-treatment-items-correct-coding-and-billing-1</p>
How will this impact Medicare Advantage coverage?	<p>Medicare Advantage Plans must cover all medically necessary services that Original Medicare covers. In many cases, you may need to get approval from your plan before it covers certain services or supplies. Contact the specific plan if you have questions about covered services.</p>
How will this impact other commercial insurance plan coverage?	<p>Commercial plans may choose to utilize the policies and guidelines Medicare publishes, or they may choose to utilize their own versions. Contact the specific plan if you have questions about covered services.</p>



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Resource Links

Final Rule

- <https://public-inspection.federalregister.gov/2023-24455.pdf>

HCPCS Code List

- <https://www.cms.gov/medicare/coding-billing/healthcare-common-procedure-system/quarterly-update>

DMEPOS Fee Schedule

- <https://www.cms.gov/medicare/payment/fee-schedules/dmepos/dmepos-fee-schedule>

CMS Lymphedema Update

- <https://www.cms.gov/medicare/payment/fee-schedules/dmepos-fee-schedule/lymphedema-compression-treatment-items>

Joint DME MAC Publication

- <https://med.noridianmedicare.com/web/jadme/article-detail/-/view/6547796/lymphedema-compression-treatment-items-correct-coding-and-billing-1>

Medicare & You Official Government Handbook

- <https://www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf>

DMEPOS Supplier Look Up

- <https://www.medicare.gov/medical-equipment-suppliers>

DMEPOS Enrollment

- <https://www.cms.gov/medicare/enrollment-renewal/providers-suppliers/durable-medical-equipment-prosthetics-orthotics-supplies-dmepos>

Assignment Agreement

- <https://med.noridianmedicare.com/web/jadme/claims-appeals/claim-submission/assignment-agreement>

Participating or Non-Participating Suppliers

- <https://med.noridianmedicare.com/web/jadme/claims-appeals/claim-submission/participating-vs-non-participating-supplier>



Acronyms

Acronym	Meaning	About	Learn More
CMS	Centers for Medicare & Medicaid Services	CMS is the federal agency that provides health coverage to more than 160 million through Medicare, Medicaid, the Children's Health Insurance Program, and the Health Insurance Marketplace. CMS works in partnership with the entire health care community to improve quality, equity and outcomes in the health care system.	https://www.cms.gov/
DMEPOS	Durable Medical Equipment, Prosthetics/Orthotics, and Supplies	Healthcare equipment provided to patients	https://www.cms.gov/medicare/payment/fee-schedules/dmepos/center And https://www.medicare.gov/media/publication/11045-medicare-coverage-of-dme-and-other-devices.pdf
DME MAC	Durable Medical Equipment Medicare Administrative Contractor	A Medicare Administrative Contractor (MAC) is a private health care insurer that has been awarded a geographic jurisdiction to process Medicare Part A and Part B (A/B) medical claims or Durable Medical Equipment (DME) claims for Medicare Fee-For-Service (FFS) beneficiaries. CMS relies on a network of MACs to serve as the primary operational contact between the Medicare FFS program and the health care providers enrolled in the program. MACs are multi-state, regional contractors responsible for administering both Medicare Part A and Medicare Part B claims.	https://www.cms.gov/medicare/coding-billing/medicare-administrative-contractors-macs/whats-mac
HCPCS	Healthcare Common Procedure Coding System	A collection of standardized codes that represent medical procedures, supplies, products and services. The codes are used to facilitate the processing of health insurance claims by Medicare and other insurers.	https://www.cms.gov/medicare/coding-billing/healthcare-common-procedure-system