

MLN Matters Number: MM4335

Related Change Request (CR) #: 4335

Related CR Release Date: March 3, 2006

Effective Date: January 1, 2006

Related CR Transmittal #: R880CP

Implementation Date: April 3, 2006

April Quarterly Update for 2006 Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Fee Schedule

Note: This article was revised to contain web addresses that conform to the new CMS website and to show they are now MLN Matters articles. All other information remains the same.

Provider Types Affected

Physicians, suppliers, and providers billing Medicare carriers, including durable medical equipment regional carriers (DMERCs) and/or fiscal intermediaries (FIs), including regional home health intermediaries (RHHIs), for services paid under the DMEPOS Fee Schedule.

Provider Action Needed

This article is based on Change Request (CR) 4335 and provides specific information regarding the quarterly update for the April 2006 DMEPOS Fee Schedule.

Background

The DMEPOS fee schedules are updated on a quarterly basis in order to:

- Implement fee schedule amounts for new codes; and
- Revise any fee schedule amounts for existing codes that were calculated in error.

Payment on a fee schedule basis is required for:

- Durable Medical Equipment (DME), prosthetic devices, orthotics, prosthetics, and surgical dressings by the Social Security Act (Sections 1834(a)(h)(i)); and

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- Parenteral and Enteral Nutrition (PEN), by regulations contained in the Code of Federal Regulations (42 CFR 414.102).

Changes made in this update include the following:

- The fee schedule amounts for HCPCS code **K0730**, *Controlled dose inhalation drug delivery system*, were added to the fee schedule file on April 1, 2006, and are effective for claims with dates of service on or after April 1, 2005.
- If processed claims for code K0730 with dates of service on or after April 1, 2005, are resubmitted as adjustments after April 1, 2006, carriers and DMERCs will adjust the claim.
- The fee schedule amounts for HCPCS code **E1010**, *Wheelchair accessory, addition to power seating system, power leg elevation system, including leg rest*, were inadvertently dropped from the January fee schedule file and are being added back to the file as part of the April 2006 update.
- The payment categories for codes **E0471** and **E0472** are being revised to move Respiratory Assist Devices from the DME category for frequently serviced items to the DME payment category for capped rental items, effective on April 1, 2006.

Implementation

The implementation date for this instruction is April 3, 2006.

Additional Information

The official instructions issued to your intermediary, carrier, or DMERC regarding this change can be found at <http://www.cms.hhs.gov/Transmittals/downloads/R880CP.pdf> on the CMS website.

If you have questions, please contact your Medicare intermediary, carrier, or DMERC at their toll-free number which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

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