CMS Manual System	Department of Health & Human Services (DHHS)							
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)							
Transmittal 280	Date: MAY 25, 2007							
	Change Request 5576							

**Subject: Adding Three CMS Specialty Codes for Suppliers of Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)** 

**I. SUMMARY OF CHANGES:** CMS has developed a new specialty code to categorize Pedorthic Personnel, Medical Supply Company with Pedorthic Personnel and Rehabilitation Agency. These specialty codes are B2: Pedorthic Personnel, B3: Medical Supply Company with Pedorthic Personnel, and B4: Rehabilitation Agency.

**New / Revised Material** 

Effective Date: January 1, 2008

Implementation Date: January 2, 2008

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

# **II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated) R=REVISED, N=NEW, D=DELETED-*Only One Per Row*.

R/N/D	Chapter / Section / Subsection / Title
N/A	

#### III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2008 operating budgets.

#### **IV. ATTACHMENTS:**

**One-Time Notification** 

<sup>\*</sup>Unless otherwise specified, the effective date is the date of service.

# **Attachment – One-Time Notification**

Pub. 100-20 | Transmittal: 280 | Date: May 25, 2007 | Change Request: 5576

**SUBJECT:** Adding Three CMS Specialty Codes for Suppliers of Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)

Effective Date: January 1, 2008

**Implementation Date:** January 2, 2008

## I. GENERAL INFORMATION

- **A. Background:** In response to the Omnibus Budget Reconciliation Act of 1993, CMS has developed specialty codes to categorize Medicare providers/suppliers who send claims to Medicare carriers and DME MACs.
- **B.** Policy: CMS specialty codes are used by all contractors to ensure claims are processed and paid correctly. CMS has developed a new specialty code to categorize Pedorthic Personnel, Medical Supply Company with Pedorthic Personnel and Rehabilitation Agency. These specialty codes are B2: Pedorthic Personnel, B3: Medical Supply Company with Pedorthic Personnel, and B4: Rehabilitation Agency.

## II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A / B M A C	D M E M A C	F I	C A R R I E	D M E R C	R H H I		I C M W		OTHER	
5576.1	Contractors shall add the codes B2, B3 and B4 to their existing CMS specialty code file. The code B2 identifies Pedorthic Personnel. The code B3 identifies a Medical Supply Company with Pedorthic Personnel. The code B4 identifies a Rehabilitation Agency.		X			X			X		X	NSC PECOS NCH CROWD

## III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A	D	F	С	D	R			Syste		OTHER
		/	M	I	Α	M	Н	I	Maint	ainers		
		В	Е		R	Е	Н	F	M	V	C	
					R	R	I	I	С	M	W	
		M	M		I	C		S	S	S	F	
		Α	Α		Е			S				
		C	C		R							
	None.											

#### IV. SUPPORTING INFORMATION

# A. For any recommendations and supporting information associated with listed requirements, use the box below:

X-Ref Requirement	Recommendations or other supporting information:
Number	
	N/A

B. **For all other recommendations and supporting information, use this space:** These codes will allow DME MACs and DMERCs to edit DMEPOS claims submission and ensure proper claims payment.

#### V. CONTACTS

**Pre-Implementation Contact(s):** Kimberly McPhillips, <u>kimberly.mcphillips@cms.hhs.gov</u> or

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#### VI. FUNDING

# A. Carriers and the Durable Medical Equipment Regional Carriers (DMERCs):

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2008 operating budgets.

# **B.** Medicare Administrative Contractors (MAC):

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.