Durable Medical Equipment: CMS Request for Information

CMS is asking for public input on problems facing dual eligibles in accessing durable medical equipment (DME). The comment deadline is August 23, 2016.

*Note that the Request for Information is in a larger notice that is primarily about End Stage Renal Disease (ESRD). The request concerning DME is not limited to DME for people with ESRD. The DME request is in this Notice simply because it was a way to get published more quickly. CMS is interested in comments about any type of DME.

The full Notice is found at 81 Fed. Reg. 42,802, 42,864 (June 30, 2016). The relevant questions are excerpted below:

Please provide comments on the scope of the following issues related to DME access for dual eligible beneficiaries:

- Obstacles to timely receipt of needed DME and repairs due to conflicting program requirements;
- Challenges or opportunities faced by Medicaid beneficiaries who newly qualify for Medicare, including challenges related to new and preexisting items, repairs, and providers;
- The percentage of Medicare competitive bidding contractors in the state which accept Medicaid;
- The role of prior authorization policies under either program, and whether these policies offer suppliers sufficient advance notice regarding coverage;
- Impacts on beneficiaries from delayed access to needed equipment and repairs;
- If access problems are more pronounced for certain categories of equipment, the categories of DME for which the access problems arise the most frequently or are most difficult to resolve;
- Challenges faced by suppliers in meeting different supporting documentation and submission requirements, and
- Other prevalent access challenges due to DME program misalignments.

We also invite feedback regarding potential regulatory or legislative reforms to address DME program misalignments including:

- State Medicaid program policies that promote coordination of benefits and afford beneficiaries full access to benefits;
- Strategies to promote access to timely, effective repairs, including from suppliers who that did not originally furnish the equipment;
- Policies to address challenges faced when beneficiaries transition from Medicaid-only to dual eligible status; and
• Other ways to promote timely DME access for dual eligible beneficiaries, without introducing new program integrity risks or increasing total expenditures in either Medicare or Medicaid. Please include specific examples when possible while avoiding the transmission of protected information. Please also include a point of contact who can provide additional information upon request.

How to comment:

1. Go to the Federal Register Notice for CMS-1651-P, “Medicare Program: End Stage Renal Disease, etc.”
2. On the right upper side of the page, click on to “Comment Now!”
3. If your comment is short, write it in the box (hint: it is often easier to draft your comment in Word and then paste it into the box)
4. If your comment is longer, click the “Upload files” box and attach a pdf or Word document
5. Complete the contact information
6. Click “Continue,” check your submission and click “Submit comment.”

PLEASE SHARE WITH CMS YOUR EXPERIENCES AND YOUR THOUGHTS ON HOW TO IMPROVE ACCESS FOR DME!

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