



NATIONAL PROVIDER ENROLLMENT CONFERENCE

59 Million Patients, 2 Million Providers, **ONE** Mission

Durable Medical Equipment Prosthetics, Orthotics and Supplies (DMEPOS)

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Session Overview



Following this presentation, the supplier will be able to identify:

- DMEPOS Basics
- Overview of the Supplier Standards
- NSC Reminders
- Resources



What is the NSC

- National Supplier Clearinghouse
- Developed by CMS to accommodate the specialized enrollment process for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) providers



Primary Responsibility

- Ensure that DMEPOS suppliers meet all Federal and State requirements to bill Medicare
 - Supplier Standards found in 42 CFR 424.57c
 - Provisions in publication 100-08 IOM, Chapter 15 of the Program Integrity Manual (PIM)

Maintain a fraud prevention and detection program



Enrolling in the Medicare Program

- Submit information to the NSC
 - Must be compliant with ALL Supplier Standards
- CMS-855S
- Application is reviewed and processed
- Site inspection is conducted
- Billing privileges issued if compliance is determined



What to expect during the site inspection

- Checking compliance with Supplier Standards
- Adhere to posted hours of business
- Make certain that qualified staff is available to answer questions and has accessibility to files and documentation
- Have current licensure & certification prominently displayed



What to expect during the site inspection

- Be able to provide inspector with accessibility to review Medicare beneficiary files if requested
- Proof of business records including warranties, delivery information, rental agreements
- Sufficient inventory on-site or evidence of contractual agreements for volume of Medicare beneficiaries served



Site inspectors should have the following when visiting your site:

- Proper photo identification
- A laminated letter signed by the NSC Supplier Audit and Compliance Unit Manager stating the purpose of the visit
- Site visit acknowledgement form that the supplier signs attesting that the visit was completed and that any outstanding documentation will be faxed to the inspector (Generally within 48 hours)

*Questionable inspection procedures should be reported to the NSC.



How to Accelerate the Enrollment Process

- Approximately 63% of applications require some level of development
- Use Internet-based PECOS
- Review application before submission (complete in it's entirety)
- Submit the fee (includes physicians and non-physician practitioners)
- Include a copy of all applicable federal, state licenses and certifications



How to Accelerate the Enrollment Process

- Include a copy of the certificate of insurance (not a binder)
 - Comprehensive liability insurance (professional liability is not acceptable)
 - Minimum amount of \$300,000
 - NSC must be listed as the certificate holder



Definition of Operational

Operational means the provider or supplier has a qualified physical practice location that remains open to the public and properly staffed during posted business hours for the purpose of providing health care related services.

The business is considered non-operational if no one is available at the place of business during routine deliveries or off-site maintenance of supplies or products to Medicare beneficiaries.



Poll Question

Questions...





Overview of the Supplier Standards

Overview of the Supplier Standards



Standard 2

- Changes of Information
 - Report changes to the NSC within 30 days of the change
 - Submitted through PECOS or on the CMS-855S
 - Location changes
 - Products and services
 - Ownership
 - Updating Licensure & Insurance

Overview of the Supplier Standards



Standard 5 & 6

■ Warranty Agreements

- The supplier under applicable State law must repair or replace free of charge items that are under warranty.
- The supplier must notify the beneficiary that they may rent or purchase inexpensive or routinely purchased items.
 - Although CMS has revised payment rules for capped rental items, supplier standard 5 still applies for inexpensive and routinely purchased items that do not fall into the capped rental category and applicable capped rental items (i.e. complex rehabilitative power wheelchairs and parental/enteral pumps, etc.).

Overview of the Supplier Standards



Standard 9

- Maintains a primary business telephone that is operating at the appropriate site listed under the name of the business locally or toll-free
 - Use of cell phones, beepers, and pagers as the primary business telephone is prohibited
 - Exclusive use of answering machines and answering services as the primary telephone number during posted business hours is prohibited
 - Calls cannot be exclusively forwarded from the primary business telephone to a cell phone or pager

Overview of the Supplier Standards



Standard 11 & 12

■ Beneficiary Contact

- The supplier agrees not to initiate telephone contact with the beneficiary unless
 - It is for service or delivery of a covered item
 - If an item has been provided within the last 15 months
 - Beneficiary has given expressed permission
 - » Capturing an internet IP address is not considered expressed permission
- The supplier is responsible for delivering the item to the beneficiary and providing instruction on its usage

Overview of the Supplier Standards



Medicare Statement

- May be used to satisfy Standard #16 in lieu of distributing standards to Medicare Beneficiaries.
 - The products and/or services provided to you by (supplier legal business name or DBA) are subject to the supplier standards contained in the Federal regulations shown at 42 Code of Federal Regulations Section 424.57(c). These standards concern business professional and operational matters (e.g. honoring warranties and hours of operation). The full text of these standards can be obtained at [42 CFR 424.57c](#). Upon request we will furnish you a written copy of the standards.

Overview of the Supplier Standards



Standard 22 & 26

- Accreditation
 - Required for all DME suppliers
 - Pharmacy exempt by attestation
 - Pharmacy exempt when billing DME drugs only
- Surety Bond
 - Unrelated to accreditation
 - Required for all DME suppliers

Overview of the Supplier Standards



Standard 29

- Prohibits the sharing of a practice location with any other Medicare provider or supplier, except:
 - Physician or Non-physician practitioner providing services to his or her own patients
 - Physical or Occupational Therapist providing services to his or her own patients
 - Wholly owned DME company by a Part A Provider
 - Hospital
 - Skilled Nursing Facility
 - Home Health Agency

Overview of the Supplier Standards



Standard 30

- Requires DMEPOS suppliers to remain open to the public for a minimum of 30 hours per week, except:
 - Physician and non-physician practitioners furnishing services to his or her own patients
 - DMEPOS supplier providing custom made orthotics and prosthetics



Poll Question



Poll Question

Questions...





Policy Updates

Policy Updates



Licensure

- Database on NSC Website is a guide
- What's New

A screenshot of the Palmetto GBA National Supplier Clearinghouse Hub website. The page is titled "Licensure Information" and includes a search bar, navigation links, and social media icons. The main content area contains a paragraph about Standard #1 of the Medicare DMEPOS Supplier Standards, a link to "View information regarding Supplier Standards," and a circled link for "What's New". A disclaimer and helpful tips section are also present.

Standard #1 of the Medicare DMEPOS Supplier Standards states that 'a supplier must be in compliance with all applicable federal and state licensure and regulatory requirements.'

View information regarding [Supplier Standards](#).

This document contains the licensure requirements for each state as it pertains to the National Supplier Clearinghouse:
[What's New](#)

Disclaimer: This licensure directory is only a guide. The various state boards or regulating agencies have the final determination as to what license is or is not required. It is the supplier's responsibility to ensure they are in compliance with all state and federal laws and regulations.

Helpful Tips:

- When looking at the database, if you see a dot in the column, that means "yes". If the dot is located in the Verify Online column, that is a link that you can click to go to the website to verify information.
- The Required for Pharmacies column will state whether or not a certain license is required for licensed pharmacies. If there is no dot present, that specific license is not required for licensed pharmacies.
- If "See Notes" appears in the Notes column on the database, it is imperative that you read the note associated with that license. There may be specific exemptions or other important information regarding the license noted.
- This database is product and service driven and not supplier specialty driven. The accreditation codes are also noted with the products/services for your convenience.

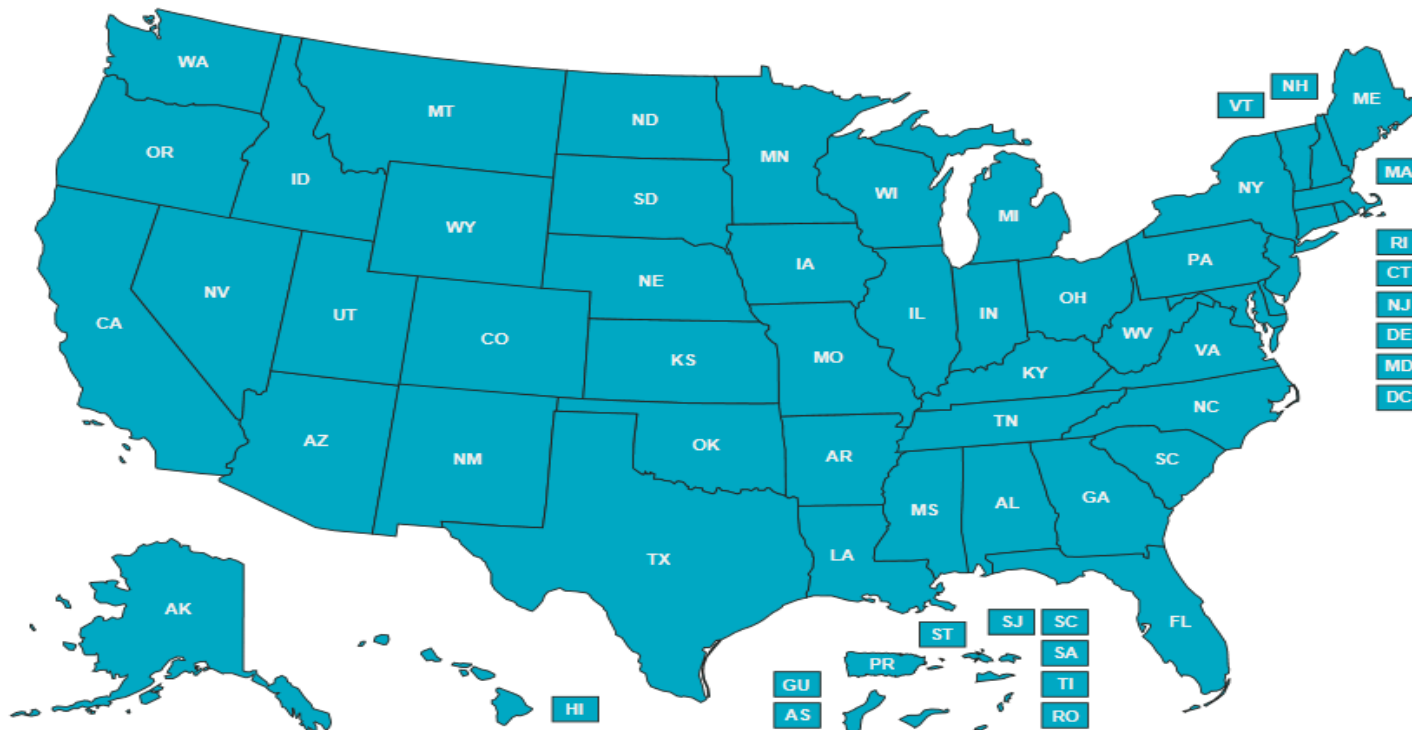
Policy Updates



DMEPOS STATE LICENSE DIRECTORY



Lookup by State:

Look up by Products/Services:



Policy Updates



DMEPOS LICENSE DIRECTORY State/Territory ▾ Map Filter Product/Services: ▾  

CA

Jump to a Product/Service:

| | Req.suppliers (out-state) | Licensing Agency | Verify Online | Req. for Pharmacies (in- state) | Notes |
|---|------------------------------|--|---------------|---------------------------------------|-------|
| Automatic Ext Defibrillator (AEDS) and/or Supplies (DM01) | | | | | |
| Home Medical Device Retailer license | Yes | California Department of Public Health, HMDR Program | | No | |
| Home Medical Device Retailer Exemptee License | No | California Department of Public Health, HMDR Program | | No | D |
| Blood Glucose Monitors/ Supplies (Non-Mail Order) (DM05) | | | | | |
| Home Medical Device Retailer License | No | California Department of Public Health, HMDR Program | | No | |
| Blood Glucose Monitors/Supplies (Mail Order) (DM06) | | | | | |

Policy Updates



DMEPOS STATE LICENSE DIRECTORY

State Map



Please Select:



Diabetic Shoes and Inserts (S02)

| State | License Name | Req Out of State | Online Verification | Req Pharmacies | Notes |
|-------|---------------------------------|------------------|---------------------|----------------|---|
| AK | No License Required | No | - | No | |
| AL | Therapeutic Shoe Fitter License | Yes | Y | No | F: Licensure requirement effective March 1, 2014. A licensed Orthotist, Prosthetist/Orthotist or Pedorthist may also provide these items. (Added: 12/12/2013) |
| AR | No License Required | No | - | No | |
| AS | No License Required | No | - | No | |
| AZ | No License Required | No | - | No | |
| CA | No License Required | No | - | No | |



Fingerprint Based Background Checks

- Implemented on August 6, 2014
- 5% or greater owners or partners
- NSC MAC to mail letters to Correspondence Address
- Suppliers can check Accurate Biometrics Website for status: www.cmsfingerprinting.com



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Questions...





NSC Reminders



Each supplier location where Medicare Beneficiaries are serviced must have billing privileges

- Exception
 - Warehouses
 - Repair facilities
- Tax ID Changes
 - NPI



Revalidations

- 42 CFR 424.57 requires every supplier to revalidate every 3 years
- NSC will mail letter to the suppliers' correspondence address when revalidation is due in a **YELLOW** envelope
- CMS Revalidation List gives 6 month notice
 - <https://data.cms.gov/revalidation>

NSC Reminders



The legal business name as reported with the IRS must match what is listed in NPPES when submitted to the NSC for processing



Adverse Legal Actions (ALAs)

- Failure to report will result in denial of application or revocation



Medicare Enrollment Fees

- DMEPOS Suppliers
 - CY 2018 - \$569
- Credit Card, Debit Card, Electronic Check
- New locations, Additional Locations, Revalidations & Reactivations
 - Applications are not processed until funds are cleared
<https://pecos.cms.hhs.gov/pecos/feePaymentWelcome.do>



Notification of Death

- Report death of associates within 30 days
 - Owners
 - Authorized Officials
 - Delegated Officials
- Stated in 100-08 IOM, Program Integrity Manual, Chapter 15.28.



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Resources

Resources



Mailing Address:

Palmetto GBA
National Supplier Clearinghouse
P.O. Box 100142
Columbia, SC 29202-3142

Overnight Mailing Address:

Palmetto GBA
National Supplier Clearinghouse AG-490
2300 Springdale Dr., Bldg. 1
Camden, SC 29020

Phone Number:

(866) 238-9652,
M - F 9:00 AM - 5:00 PM, ET

Website:

<http://www.PalmettoGBA.com/NSC>

E-mail:

Medicare.NSC@PalmettoGBA.com

Resources



Social Media :

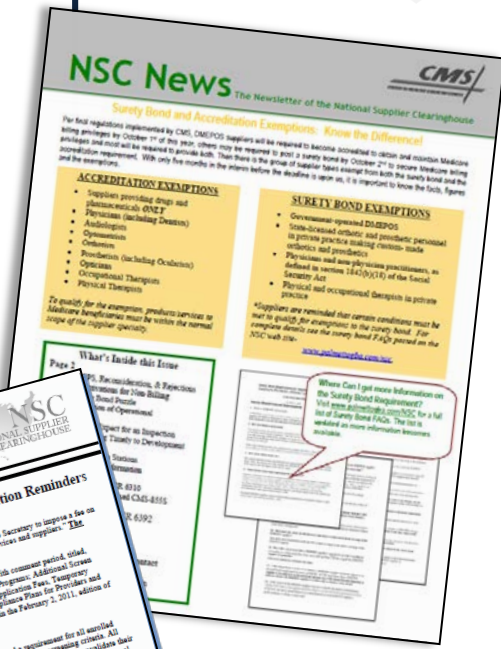
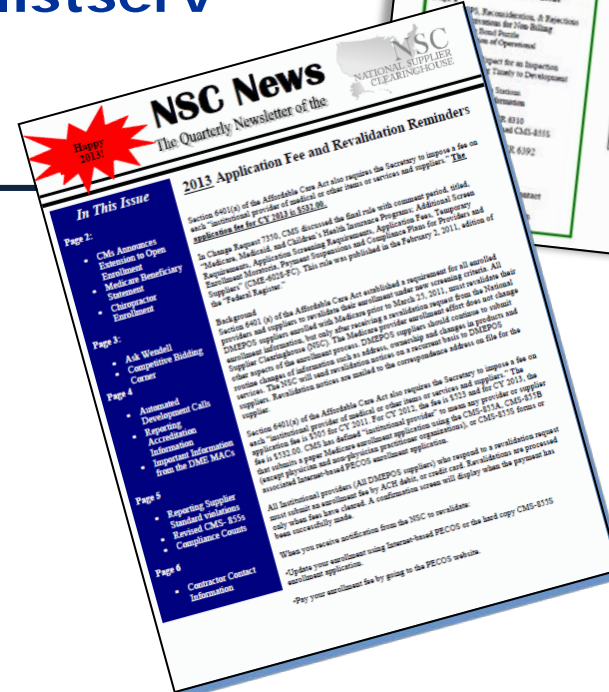
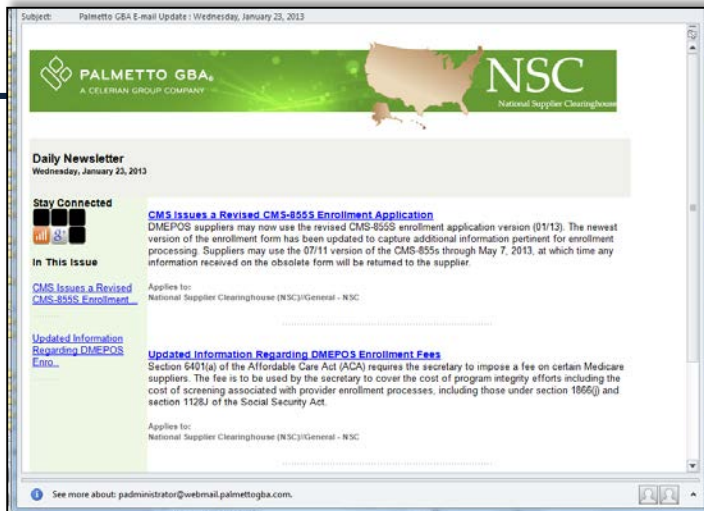


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Resources



Simply scan the QR code with your wireless device to navigate to the subscription page for the **NSC listserv**





Online Application Status Tool

- Search by PTAN, NPI, TIN, DCN
 - www.palmettogba.com/nsc
- Interactive Voice Response (IVR) Unit
 - General information regarding the enrollment process
 - Information on the appeals process
 - Status of applications
 - Instructions on how to obtain a CMS 855S
 - Contact information for the NSC, DME MAC and CMS
 - The IVR is available 24 hours a day, seven days a week (except for routine system maintenance) and can be accessed by calling the NSC Customer Service Line at **(866) 238-9652**



DMEPOS Status Letter

Palmetto GBA Corporate Palmetto GBA Medicare

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CMS
CENTER FOR MEDICARE & MEDICAID SERVICES

MEDICARE HOME CONTACT US E-MAIL UPDATES search

National Supplier Clearinghouse

DMEPOS PTAN Status

Receive an official DMEPOS Enrollment Status Letter.

To request a letter with your current enrollment status information, (similar to the letter that was first issued when you enrolled in the program), please enter your 10-digit PTAN in the field provided and select "Request Letter".

Letters will be mailed to the correspondence address on file with the NSC within 1-2 business days.

Note: This option is only available to suppliers who have already been assigned a DMEPOS PTAN for the location for which they are requesting the letter.

DMEPOS PTAN:

Request Letter **Reset**

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Resources



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NSC Web Form Submission

CMS
FOR MEDICARE & MEDICAID SERVICES

NSC Web Form Submission

To upload any documentation to the National Supplier Information System (NSIS), the documentation must be in PDF format. The documentation must be in PDF format.

Do not submit a CMS-855S application or any changes of information with this Web form. Any changes of information submitted with this form will not be processed. Refer to our [Change of Information Guide](#) on how to submit any other enrollment information that needs to be updated.

You can only submit documentation if you have a DMEPOS PTAN (active or revoked). If you do not have a DMEPOS PTAN (active or revoked), you must apply for one to the NSC for review.

Select the appropriate Document Type :

- Licenses
- SACU Supplier Response
- Standalone Certificate of Insurance
- NPI Letter
- Surety Bond
- Appeals

For additional information, please contact NSC Customer Service, Monday - Friday, 9 AM - 5 PM ET at (866) 238-9652

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- NSC Web Submission Form
- 855S not required
- PTAN (active or revoked)

Resources

A screenshot of the Palmetto GBA NSC Hub website. The page has a green header with the Palmetto GBA logo and navigation links for "NSC Hub", "Topics", and "Forms / Tools". A search bar is on the right. The main content area is titled "National Supplier Clearinghouse MAC" and includes a description of the clearinghouse's role. Below this are three columns of content: "Top Links" with links to CMS clarification, contact info, standards, appeals, and a change of information guide; "Forms / Tools" with links to download applications, view fees, access databases, and use status tools; and a list of events including a CMS conference and NSC webinars. A red oval highlights the "New Supplier Enrollment Document" link in the right column.

Event Portal Listservs Contact Us

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NSC Hub Topics Forms / Tools

Search

palmettogba.com /

National Supplier Clearinghouse MAC

The National Supplier Clearinghouse is the single organizational entity responsible for issuing or revoking Medicare supplier billing privileges for suppliers of Durable Medical Equipment, Orthotics and Supplies (DMEPOS).

Top Links

- CMS Provides Clarification for Fingerprint-based Background Checks
- Contact Information
- Standards & Compliance
- Appeals Process
- Change of Information Guide

View All Topics

Forms / Tools

- Download a CMS-855S Enrollment Application
- Internet PECOS and Medicare Enrollment Fee
- Licensure Database
- NSC Application Status Tool
- NSC Web Form Submission

View All Tools

- CMS National Provider Enrollment Conference
April 24 and 25, 2018 in San Diego, California
- New Supplier Enrollment Document**
Step by Step Guide to Enrollment
- Register for NSC Webinars
Get enrollment updates on demand



New Supplier DMEPOS Enrollment



Step 1: Obtain a National Provider Identifier (NPI)

Visit <https://nppes.cms.hhs.gov>
<https://nppes.cms.hhs.gov>



Step 2: Obtain an Accreditation from a CMS approved Organization

Visit <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/DMEPOSAccreditation.html>



Step 3: Need to have a valid surety bond for \$50,000

Visit <https://www.fiscal.treasury.gov>



Step 4: Valid state license for state(s) services are rendered

Refer to the licensure database for appropriate licensure:
www.palmettogba.com/nsc Select Licensure Database from tools



Step 5: General Liability Insurance of at least \$300,000



Step 6: Adhere to the DMEPOS Supplier Standards

Standards can be located at www.palmettogba.com/nsc
Select Standards and Compliance then Medicare Durable Medical



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Questions...

