



# Physicians, Nurse Practitioners, Physician Assistants and Clinical Nurse Specialists

## What You Need to Know About Ordering Durable Medical Equipment & Medical Supplies for Medicaid Beneficiaries

The Affordable Care Act (ACA) requires beneficiaries to have had a face-to-face evaluation (in-person or via telemedicine) with a physician or non-physician practitioner (applies only to nurse practitioners, physician assistants and clinical nurse specialists) prior to obtaining a written order for specified durable medical equipment and supplies. Medicare implemented this rule in 2013. Medicaid applied this rule for orders written on and after July 1, 2018 (MSA bulletin 18-17).

The Centers for Medicare and Medicaid Services (CMS) maintains the list of applicable DME & supplies at:

[www.cms.gov/Research-Statistics-Data-andSystems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/MedicalReview/Downloads/DME\\_List\\_of\\_Specified\\_Covered\\_Items\\_updated\\_March\\_26\\_2015.pdf](http://www.cms.gov/Research-Statistics-Data-andSystems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/MedicalReview/Downloads/DME_List_of_Specified_Covered_Items_updated_March_26_2015.pdf).

### Face-to-Face Evaluation:

- Patient evaluation by a physician or non-physician practitioner
- Must be evaluated on or before the date of the initial written order but no more than 6 months prior to the order date.
- The evaluation must be specific to the condition that is the primary reason the person needs the item(s).
- The Physician must review for continued need on an annual basis.

### Timeframes:

- Face-to-Face evaluation on or before initial written order (not to exceed 6 months prior to order).
- Written order must be received by durable medical equipment(DME) provider before delivery of the equipment/supplies.
- The DME provider must have the face-to-face documentation, written order, certificate of medical necessity (CMN) and any other required documentation prior to delivery (if item requires prior authorization this information must be received by the DME provider prior to submitting a prior authorization request).

### Required Face-to-Face Documentation Elements:

- Date of face-to-face evaluation.
- Name and signature of practitioner that performed the evaluation.
- Reason for the visit including the specific condition that supports the need for the item(s) ordered. A diagnosis code alone is not sufficient.

All other documentation requirements and standards of coverage indicated in Medicaid policy apply.

**A New Face-to-Face Evaluation is Required for:**

- Initial purchases or rentals;
- Changes to original orders (e.g. quantities, frequency, etc.);
- Replacement of an item(s);
- The new DME supplier when they are unable to acquire a copy of the valid order and documentation from the original DME supplier.
- Changes in state or federal law, policies or regulations as applicable.

**Other Information:**

A treating physician in a hospital or emergency department may conduct the face-to-face evaluation and order the item(s). If the treating physician chooses to evaluate but does not want to be the ordering physician, he/she must communicate their findings to the ordering physician. The communication may be provided electronically (following HIPAA criteria), verbally, by fax or U.S. mail. All preceding face-to-face requirements apply.

The Michigan Department of Health and Human Services (MDHHS) encourages physicians to coordinate with their local durable medical equipment providers, hospitals, emergency departments, urgent care centers and other providers to ensure compliance with this rule and to avoid delays in services to Medicaid patients.

Review the MDHHS bulletin MSA 18-17 for more details: [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders) >> Policy, Letters & Forms >>Michigan Medicaid Approved Bulletins 2018

These requirements are stipulated by CMS in the Federal Register (Vol. 81, No. 21, Tuesday, February 2, 2016). Updates from CMS Interim Final Rule CMS-5531 applied on 7/23/20.

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