CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-08 Medicare Program Integrity	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12056	**Date: May 25, 2023**
	Change Request 13185

SUBJECT: Update to Chapter 3 of Publication (Pub.) 100-08 (Program Integrity Manual (PIM)) for the Voluntary Prior Authorization (PA) Process for Durable Medical Equipment, Prosthetics, Orthotics, Supplies (DMEPOS) Accessories

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to insert new subsection, 3.10.1.1. to section 3.10 in Chapter 3 of Pub.100-08 (PIM) regarding the voluntary PA process for DMEPOS accessories.

EFFECTIVE DATE: June 26, 2023
**Unless otherwise specified, the effective date is the date of service.*
IMPLEMENTATION DATE: June 26, 2023

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
R	3/Table of Contents
N	3/3.10/3.10.1.1/Voluntary Prior Authorization Process for DMEPOS Accessories

III. FUNDING:
For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. 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.

IV. ATTACHMENTS:

Business Requirements
Manual Instruction

Attachment - Business Requirements

Pub. 100-08	Transmittal: 12056	Date: May 25, 2023	Change Request: 13185

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I. GENERAL INFORMATION

A. Background: The 2019 End Stage Renal Disease and DMEPOS final rule (84 Fed. Reg. 60648 (Nov. 8, 2019)) permits CMS to develop a program to allow suppliers to voluntarily include certain accessories on PA requests submitted for items on the Required PA List. These accessories may receive a PA decision for operational simplicity, even if the accessory itself is not on the Required PA List. Voluntarily submitting a PA request for accessories does not create a condition of payment and is not mandatory.

PA requests for accessories must include a corresponding item on the Required PA List; otherwise, the PA request for the accessory will be rejected. Accessories submitted on a PA request where the corresponding item on the Required PA List is non-affirmed will also be non-affirmed.

The list of DME items that require PA can be found on Required PA List, and the list of selected accessories that can be voluntarily added to PA requests can be found on the Voluntary PA List. The Required PA List and the Voluntary PA List and will be updated as additional codes are selected.

B. Policy: 42 Code of Federal Regulations 405 and 414.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B MAC			DME	Shared-System Maintainers				Other
		A	B	HHH	MAC	FISS	MCS	VMS	CWF	
13185.1	The contractor shall use this section as overall guidance regarding the DMEPOS accessories.				X					

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility

		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Chirymeria Wilson, 410.786.1046 or Chirymeria.Wilson@cms.hhs.gov , Stephanie Collins, 410-786-0959 or stephanie.collins@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. 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.

ATTACHMENTS: 0

Medicare Program Integrity Manual

Chapter 3 - Verifying Potential Errors and Taking Corrective Actions

Table of Contents
(Rev. 12056; Issued: 05-25-23)

Transmittals for Chapter 3

3.10.1.1 Voluntary Prior Authorization (PA) for DMEPOS Accessories

3.10.1.1- Voluntary Prior Authorization (PA) for DMEPOS Accessories
(Rev: 12056; Issued: 05-25-23; Effective: 06-26-23; Implementation: 06-26-23)

The 2019 ESRD and DMEPOS final rule (84 Fed. Reg. 60648 (Nov. 8, 2019)) permits CMS to develop a program to allow suppliers to voluntarily include certain accessories on prior authorization requests submitted for items on the Required Prior Authorization List. These accessories may receive a prior authorization decision for operational simplicity, even if the accessory itself is not on the Required Prior Authorization List. Voluntarily submitting a prior authorization request for accessories does not create a condition of payment and is not mandatory.

Prior authorization requests for accessories must include a corresponding item on the Required Prior Authorization List; otherwise, the prior authorization request for the accessory will be rejected. Accessories submitted on a prior authorization request where the corresponding item on the Required Prior Authorization List is non-affirmed will also be non-affirmed.

The list of DME items that require prior authorization can be found on Required Prior Authorization List, and the list of selected accessories that can be voluntarily added to prior authorization requests can be found on the Voluntary Prior Authorization List. The Required Prior Authorization List and the Voluntary Prior Authorization List will be updated as additional codes are selected.

For more information, please see the CMS DMEPOS Prior Authorization website.