

CGS JURISDICTION B & C

Disaster Related Frequently Asked Questions

Question: Can supplies (Diabetic testing, surgical dressings, urologicals, etc.) be provided early in anticipation of a natural disaster?

Answer: The current refill requirements would apply. The supplier can deliver no more than 10 days prior to exhaustion of supplies. Providing items early (either prior to the 10 days or if the supply is not nearing exhaustion) is not within the current requirements.

Question: Will Medicare pay for replacement when the equipment/item is lost, destroyed, irreparably damaged due to a disaster?

Answer: Yes. Medicare will pay for replacement when the equipment/item is lost, destroyed, irreparably damaged, or otherwise rendered unusable due to circumstances relating to an emergency or disaster.

This includes supplies, drugs, inexpensive or routinely purchased items, customized items, and other prosthetic and orthotic devices. Medicare does not pay for the replacement of items that require frequent and substantial servicing.

Suppliers must include an “RA” modifier and narrative on the claim explaining why the equipment must be replaced and maintain documentation indicating that the DMEPOS was lost, destroyed, irreparably damaged or otherwise rendered unusable as a result of a disaster.

If the item is affected by a formal waiver: Use of the “CR” modifier is mandatory on claims for items and services for which Medicare payment is conditioned on the presence of a “formal waiver” including, but not limited to, waivers granted under either Section 1135 or Section 1812(f) of the Act.

If the supplier is aware that the item is a replacement, they should annotate the claim with the “RA” modifier in addition to “CR” modifier and append all other applicable modifiers.

Suppliers must include a narrative on the claim explaining the reason why the equipment must be replaced and are reminded to maintain documentation indicating that the DMEPOS was lost, destroyed, irreparably damaged or otherwise rendered unusable as a result of a natural disaster.

Question: If the destroyed item was initially denied by Medicare, will the replacement be covered?

Answer: No. Medicare would not cover replacement if the initial/destroyed item was not covered by Medicare.

Question: Do documentation requirements still apply in a disaster or emergency?

Answer: Yes. A new face-to-face, physician’s order, and certificate of medical necessity requirements are still in effect, unless specified by CMS – unless:

- The President of the United States declares a state of emergency for the particular area,
- The Health and Human Services Secretary declares a Public Health Emergency for the particular area, and
- CMS issues a specific waiver allowing for such a waiver based on Section 1135 of the Social Security Act.

Question: How would a supplier know if an 1135 waiver has been issued?

Answer: Information regarding current waivers is located at: <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page.html>

Question: How can beneficiaries that have been displaced, without access to their usual suppliers, get access to durable medical equipment, prosthetics, orthotics and supplies?

Answer: Beneficiaries may contact 1.800.MEDICARE for information regarding suppliers servicing their current location. Alternatively, they can obtain a listing of suppliers by geography, proximity and name at: <http://www.medicare.gov/supplier>.

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Question: Can any supplier provide replacement items during a disaster or emergency?

Answer: If competitive bidding is in effect for the date of service, the replacement is a competitive bid item, and the beneficiary is in a CBA the item must be provided by a contract supplier. Otherwise, the beneficiary can obtain the items from any Medicare enrolled supplier.

Question: If a beneficiary is in a Skilled Nursing Facility (SNF) but their item was affected by a hurricane, can they obtain a replacement billed to the DME MAC?

Answer: If the item is included in consolidated billing, the replacement cannot be billed to the DME MAC and the supplier should look to the SNF for reimbursement.

Question: If a beneficiary is in hospice and the need for the item is due to the hospice diagnosis and their item was affected by a hurricane can they obtain a replacement billed to the DME MAC?

Answer: No. This is because the need for the item is due to their hospice diagnosis. The supplier should look to the hospice for reimbursement.