

Information partners can use on:

Durable Medical Equipment, Prosthetics, Orthotics, and Supplies Competitive Bidding Program: Temporary Gap Period

All Medicare Durable Medical Equipment, Prosthetics, Orthotics, & Supplies (DMEPOS) Competitive Bidding Program (CBP) contracts expire on December 31, 2018. Starting January 1, 2019, there will be a temporary gap in the DMEPOS CBP that CMS expects will last until December 31, 2020.

During the temporary gap, any Medicare enrolled DMEPOS supplier may furnish DMEPOS items and services to people with Medicare. In most cases, people with Medicare won't need to switch suppliers on or after January 1, 2019. Suppliers must continue to furnish:

- Capped Rental items (such as wheelchairs, hospital beds, and continuous positive airway pressure devices) through the remainder of the 13-month rental period. Title to the equipment must be transferred from the supplier to the person with Medicare using the equipment after the end of the 13th month.
- Oxygen and oxygen equipment through the remainder of the 36-month rental period. After the 36th continuous month of Medicare payment, the supplier is required to continue providing the oxygen and oxygen equipment during any period of medical need for the remainder of the five-year reasonable useful lifetime of the oxygen equipment.

An exception to these two requirements is if people with Medicare travel or permanently move outside their supplier's normal service area. Suppliers that furnish oxygen equipment for the 36th continuous month of Medicare payment must arrange for people with Medicare to get their oxygen and oxygen equipment in the new area for the remainder of the 5-year reasonable useful lifetime of the equipment.

For all other DMEPOS items (for example, diabetes testing supplies, enteral nutrients/supplies, or IV poles), people with Medicare may have to switch to another supplier if their current supplier isn't willing to continue providing the items on or after January 1, 2019.

You can remind people with Medicare to:

- Use the Medicare Supplier Directory (www.medicare.gov/supplier) to locate a supplier.
- Call 1-800-MEDICARE (1-800-633-4227) to locate a supplier, ask a question, or file a complaint.
- Ask if their supplier accepts Medicare assignment. If the supplier doesn't accept assignment, the person with Medicare could be responsible for paying higher coinsurance.
- Beware of aggressive marketing by suppliers:
 - Don't let anyone persuade them to switch suppliers. Talk to their supplier first because they may not need to make a change.
 - Remember that Medicare and Medicaid don't send representatives to their homes to sell products or services.
 - Don't be influenced by certain media advertising. Many television and radio ads don't have their best interest at heart.
 - Report fraud using the HHS Office of Inspector General's "<https://forms.oig.hhs.gov/hotlineoperations/report-fraud-form.aspx>" online form, or
 - Call the Fraud Hotline of the HHS Office of Inspector General at 1-800-HHS-TIPS (1-800-447-8477).

You have the right to get Medicare information in an accessible format, like large print, Braille, or audio. You also have the right to file a complaint if you feel you've been discriminated against. Visit <https://www.medicare.gov/about-us/nondiscrimination/accessibility-nondiscrimination.html>, or call 1-800-MEDICARE (1-800-633-4227) for more information. TTY users can call 1-877-486-2048.

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