



A look at the Competitive Bidding Program and a look at three new URMBT Programs

Medicare changes in DME providers (Competitive Bidding Program)

In all areas of the country, covered equipment or supplies must be obtained from Medicare approved suppliers in order for Medicare to pay for the equipment.

Medicare initiated a new program effective January 1, 2011, called "Competitive Bidding" for durable medical equipment, prosthetics, orthotics and supplies. You should have received information about this program from the Centers for Medicare & Medicaid Services (CMS) in late 2010.

This program resulted in changes in the approval status of some suppliers furnishing certain DME equipment (i.e., for individuals needing certain items like oxygen, mail-order diabetic supplies, standard power wheelchairs, hospital beds, etc.)

If you are in an area where your suppliers are no longer Medicare-approved suppliers, you must select a new Medicare-approved supplier to provide the equipment and or supplies. To find a Medicare-approved supplier, you may contact your DME/P&O provider, HME National Network for information. The phone number is: 1-888-722-0322.

This change occurred in certain areas of the country, but the bidding process will be expanded to other areas. The next round of competitive bidding is scheduled for January 1, 2013. As more information becomes available, this will be shared with you.

The areas that are currently impacted by this program are:

- Charlotte-Gastonia-Concord (North Carolina and South Carolina)

- Cincinnati-Middletown (Ohio, Kentucky, and Indiana)
- Cleveland-Elyria-Mentor (Ohio)
- Dallas-Fort Worth-Arlington (Texas)
- Kansas City (Missouri and Kansas)
- Miami-Fort Lauderdale-Pompano Beach (Florida)
- Orlando-Kissimmee (Florida)
- Pittsburgh (Pennsylvania)
- Riverside-San Bernardino-Ontario (California)

If you are seeking services in one of the areas listed above, you need to use specific Medicare-approved suppliers for Medicare to pay for the following items:

- Oxygen, oxygen supplies
- Standard power wheelchair, scooter, and related accessories
- Certain complex rehabilitative power wheelchairs and related accessories (Group 2 only)
- Mail-order diabetic supplies
- Enteral nutrients, equipment, and supplies
- Hospital beds and related accessories
- Continuous Positive Airway Pressure (CPAP) devices and Respiratory Assist Devices (RAD's) and related supplies and accessories
- Walkers and related accessories
- Support surfaces including certain mattresses and overlays (Group 2 mattresses and overlays in Miami-Fort Lauderdale-Pompano Beach only)

Competitive Bidding Program continued on next page.

NRS Benefit Information

Competitive Bidding Program continued from previous page.

This program applies whether you are a resident in any of the above listed areas or are traveling through one of the impacted areas. If you live in a non-impacted area and travel to an impacted area, you must still use a Medicare-approved supplier to get the above listed DME items.

To find a Medicare-approved supplier, you may contact HME National Network for information. The phone number is: 1-888-722-0322.

The following table may be helpful:

If you live in	And travel to	You may go to
An area participating in the program	A different area participating in the program	A Medicare-contract supplier located in the area you traveled to for items included in the program
An area participating in the program	A area NOT participating in the program	Any Medicare-approved supplier
An area NOT participating in the program	An area participating in the program	A Medicare-contract supplier located in the area you traveled to for items included in the program
An area NOT participating in the program	A area NOT participating in the program	Any Medicare-approved supplier

Source: CMS Tip Sheet, November 2010

If you go to a Medicare-approved supplier who is not in the HME network, HME will still accept and process your claim. Importantly, Medicare will continue to pay for diabetic supplies obtained from a mail order

Medicare contracted supplier or a local pharmacy or storefront. Local stores do not have to be contracted with Medicare unless they are also offering diabetic supplies through mail order.

In addition, Medicare will help pay for walkers furnished by your doctor or treating health care practitioner (including physician assistants, clinical nurse specialists, and nurse practitioners), even if he or she is not a Medicare-contracted supplier. This only applies if the walker is supplied in the physician's office during a visit for medical care. Medicare will also pay for walkers furnished by a hospital while admitted or on the date of discharge, even if the hospital is not a Medicare-contracted supplier.

If you rent oxygen or certain other durable medical equipment, and the current supplier isn't a contract supplier, you may be able to continue renting these items from your current supplier, if the current supplier decided to participate in the program as a "grandfathered" supplier. This rule applies only to certain equipment that can be rented, such as Continuous Positive Airway Pressure (CPAP) devices, oxygen, and oxygen supplies. If you began renting additional equipment from a "grandfathered" supplier after January 1, 2011, Medicare will not pay for the new equipment.

If you live in one of these impacted areas (or attempt to obtain these items while visiting) do not use a Medicare-contracted supplier), Medicare may not pay for the item, and you will likely pay full price. Also, if you utilize a supplier that is not contracted with Medicare, you may be asked to sign an Advance Beneficiary Notice which states that Medicare probably will not pay for the item or service.

New Programs available to URMBT Members

Cardiac Rehabilitation:

- This program covers phases 1 and 2 of cardiac rehabilitation as part of a therapy benefit for all Trust members who have had a qualifying cardiac episode.
- It is designed to help with recovery and establish sustainable behavior modifications.
- This benefit must be prescribed by a physician.

Diabetes Education:

- This program covers comprehensive American Diabetes Association approved education classes for newly diagnosed or current diabetics.
- The classes are designed to help diabetics self-manage their condition and prevent complications. Topics include proper nutrition and testing, foot care, managing blood sugar levels, emotional adjustments, etc.
- You may locate participating classes in your area by requesting a referral from your physician, speaking with BCBS or by visiting professional.diabetes.org/erp_zip_search.aspx

This benefit must be prescribed by a physician.

Smoking Cessation:

A comprehensive smoking cessation program that coordinates and utilizes counseling and prescription drug therapy. The program is called Quit the Nic and provides counseling and support for members suffering from all forms of tobacco addiction and empowers them to quit successfully. Please note: in order to receive covered nicotine replacement medications (e.g., Chantix or Zyban), you must participate in the smoking cessation program. Coaches are available Monday through Friday from 9:00 a.m. to 9:00 p.m. The phone number is: 800-775-2583.



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