

**DURABLE MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT/
OXYGEN AND RELATED RESPIRATORY EQUIPMENT SERVICES
(DMS/DME/OXY)
USEFUL BILLING INFORMATION**

Maryland Medicaid updates the DMS/DME/OXY Approved List of Items on the same schedule as Medicare. The items on the Approved List of Items are covered as long as the items requested are deemed medically necessary. It is important that you review the current list to ensure that you are using the correct procedure code when requesting prepayment authorization (form DHMH-4527) and direct billing DMS/DME/OXY items. Before requesting prepayment authorization, ensure that the procedure codes require prepayment authorization by referring to the "PA" column on the Approved List of Items. It is also important to make sure that miscellaneous procedure codes are not used when there is an available code for that item. Additionally, DMS, DME and OXY items should be requested on **different** prepayment authorization forms. These errors will cause a delay in processing your request.

***NOTE:** The column referred to as "Medicare Coverage" indicates whether Medicare covers that particular item. A block that is blank indicates that Medicare either covers the item with special coverage instruction or it is up to the MME Regional Carrier's (DMERC) discretion.*

If the request has been approved, place the prepayment authorization number in Block #23 of the CMS-1500 form. All the information entered on the claim must correspond to the information on the approved prepayment authorization. Separate claims based on items that require authorization. Submit items that do not require authorization on a different CMS-1500 form.

***NOTE:** When billing by paper or electronically, if there is no prepayment authorization number for the claim, please leave the area reserved for the prepayment authorization number blank. Filling in this area unnecessarily will cause a denial of payment.*

When billing for DMS/DME/OXY, indicate the number of units in Block #24G based on the pricing units stipulated in the Approved List of Items.

Use of Modifiers: When billing for rentals, use modifier "**RR**". Any rentals beyond three (3) months require prepayment authorization. When billing for new equipment, use "**NU**". When billing for used equipment use "**UE**", which requires prepayment authorization.

Please visit

<http://mmcp.dhmh.maryland.gov/communitysupport/SitePages/Home.aspx> if you have questions or concerns about DMS/DME/OXY, or would like a copy of the Approved List of Items. Also available is the prepayment authorization form (DHMH-4527), provider memos/transmittals, and access to the DMS/DME regulations (COMAR 10.09.12) and OXY regulations (COMAR 10.09.18). If you prefer to speak with a Staff Specialist, call 410.767.1739.

If you have additional billing questions pertaining to the CMS-1500 form, please contact Provider Relations at 410.767.5503.