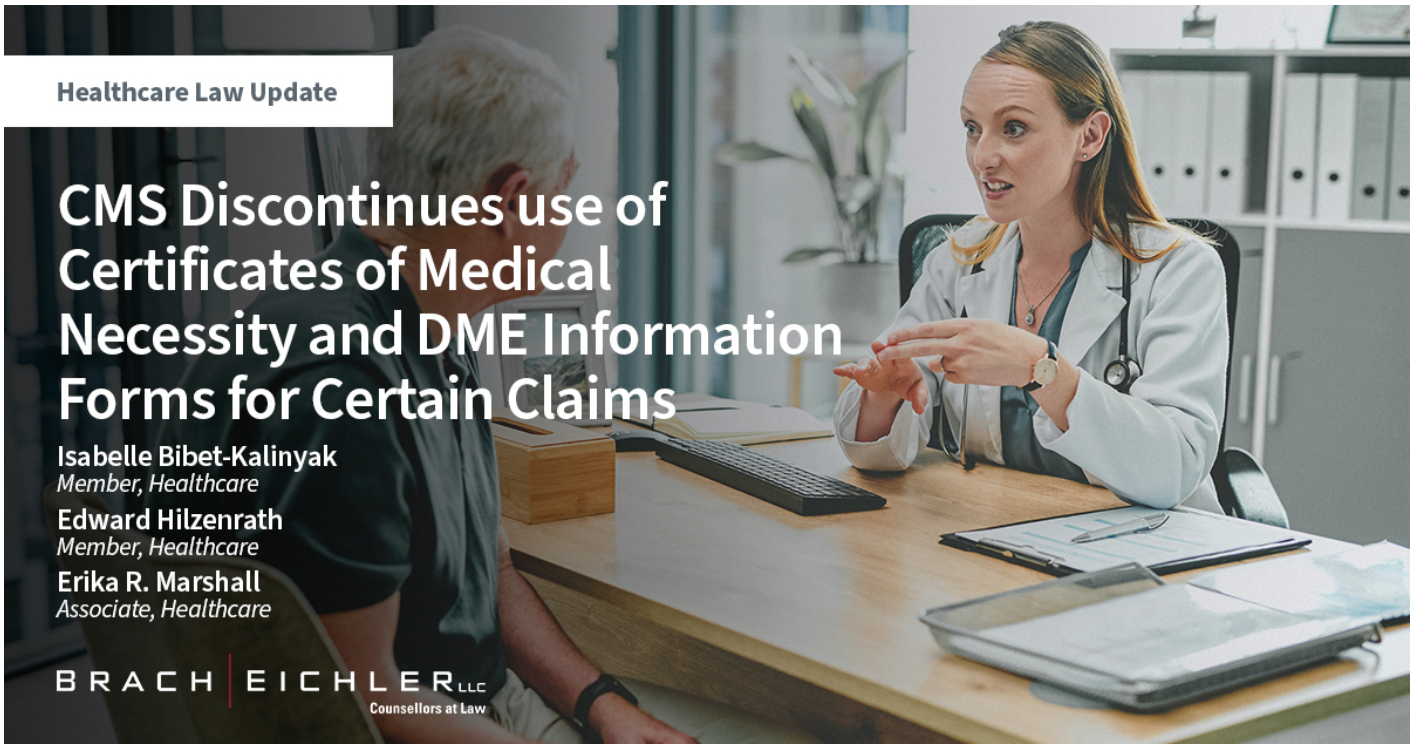
CMS Discontinues use of Certificates of Medical Necessity and DME Information Forms for Certain Claims



The Centers for Medicare & Medicaid Services (CMS), in its effort to reduce redundancy and improve efficiency, released on May 23, 2022 its decision to eliminate the need for Certificates of Medical Necessity (CMNs) and Durable Medical Equipment (DME) Information Forms (DIFs). This change takes effect beginning on January 1, 2023, and directly impacts providers, suppliers, billers, and vendors who bill CMS for services and equipment provided to Medicare patients. CMS previously required the submission of CMNs and DIFs to document medical necessity and other coverage criteria for selected DME. Such forms had to be submitted with a claim to receive reimbursement. After January 1, 2023, claims for services involving the following specific items will not require the submission of either a CMN or DIF: CMS-484 Oxygen, CMS 846 – Pneumatic Compression Devices, CMS 847 – Osteogenesis Stimulators, CMS 848 – Transcutaneous Electrical Nerve Stimulators, CMS 849 – Seat Lift Mechanisms, CMS 854 – Section C Continuation Form, SMS 10125 – External Infusion Pumps, CMS 10126 – External and Parenteral Nutrition. If those forms are submitted with claims after January 1, 2023, CMS will reject the claim in its entirety.

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For more information, contact:
Isabelle Bibet-Kalinyak | 973.403.3131 | ibibetkalinyak@bracheichler.com
Edward Hilzenrath | 973.403.3114 | ehilzenrath@bracheichler.com
Erika R. Marshall | 973.364.5236 | emarshall@bracheichler.com