

## Appendix A

### CMS Responses to Public Comments Received (60-day FR Notice)

The Centers for Medicare and Medicaid Services (CMS) received 2 comments in response to the publication of proposed collection and comment request for the extension without change of a currently approved collection for CMS Form Numbers: CMS-484, 846, 847, 848, 849, 854, 10125, 10126 (OMB control number:0938-0679).

One comment was received from a national organization representing durable medical equipment, respiratory therapy, infusion therapy, prosthetics, orthotics, and supplies (DMEPOS) suppliers, manufacturers, and other stakeholders in the homecare. One comment was submitted by a representative of a company that develops and markets orthopedic medical products.

A brief description of each comment is below, followed by the CMS response.

#### **Comment:**

A national organization representing durable medical equipment, respiratory therapy, infusion therapy, prosthetics, orthotics, and supplies (DMEPOS) suppliers, manufacturers, and other stakeholders in the homecare requests CMS eliminate all certificates of medical necessity (CMNs) and DME information forms (DIFs) as they are currently considered claims processing tools. They explained that CMS should alter claims processing requirements to eliminate them as they have done in the past with CMNs for continuous positive airway pressure (CPAP) and hospital beds. The commenter stated that if CMNs cannot be completely removed, using electronic medical records and mandating the adoption of CMS' clinical data elements (CDEs) is an opportunity to replace CMN and DIFs. They reasoned that the CDEs include all Medicare documentation requirements to complete a DMEPOS order and allows the process of collecting all the documentation requirements and communicating with the prescriber more efficient. Concern was expressed that the current process is burdensome on the supplier and the physician, and ultimately affects beneficiary access to DMEPOS items as suppliers use time and resources to obtain paperwork that would otherwise be spent servicing beneficiaries.

#### **Response:**

**CMS appreciates the suggestion and concern expressed by this commenter but the current environment for claims payment relies on the data elements provided on the CMN or DIF. As CMS claims payment moves to a more automated, electronic environment, we will consider eliminating CMNs and DIFs.**

**Comment:**

The Centers for Medicare and Medicaid Services (CMS) received a comment from a company that develops and markets orthopedic medical products. The commenter requests consideration for the modification of CMS-847 with revision to the wording of questions 6 and the removal of question 12 on the form.

**Response:**

**CMS thanks the commenter for suggested changes to questions on the CMN form. At this time, due to the edits in the claims systems, we are not making any changes to the CMN forms. As we stated above, CMNs and DIFs are an integral resource for claims payments. As the claims environment changes to become more automated, CMS will at that time, reevaluate suggested changes to the questions on these forms. We will keep this suggestion on file until that time.**