

# **Fitzsimmons**

Home Medical Equipment

8000 W 186<sup>th</sup> Street  
Tinley Park, IL 60487  
Phone: (708) 532-1199  
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## **Affordable Care Act Medicare Face-to-Face Requirements**

The prescriber must provide a copy of the face-to-face examination and the prescription for the item(s) to the DMEPOS supplier before the item can be delivered.

### ***Items that require a Face-to-Face and a detailed written order prior to delivery\****

Wheelchairs	BiPaps	Nebulizers
Cough Assists	Gel Overlays	Low Air Loss
Semi Electric Hospital Beds	Non Invasive Ventilators	Negative Pressure Wound Therapy
Gaseous Portable Oxygen	Lift Chair Mechanism	Tens Units

***Requirements only apply to patients with Medicare***

### ***Items needing only a written or verbal order prior to delivery***

Oxygen Concentrators	Oxygen Homefill Systems	Walkers
Commodes	Canes	CPAPs
Patient Lifts	Suction Pumps	Crutches

### **Tips on Face-to-Face Encounters**

- ✓ The face-to-face examination must document that the beneficiary was evaluated and/or treated for a condition that supports the need for the item(s) of DME ordered.
- ✓ Encounter must be documented in progress notes.
- ✓ Encounter must be within 6 months of delivery (30 days for Oxygen)
- ✓ Encounter must be signed and dated (Electronic or Pen & Ink)

### **Tips on Detailed Written Orders required prior to delivery**

- ✓ Order must include detailed description of item ordered
- ✓ Order printed name and NPI must be listed on the order
- ✓ A start date or order date must be listed in addition to a signature date.
- ✓ Order must be must be signed & dated (Electronic or Pen & Ink)

**\*For full listing of all items requiring a Face-to-Face encounter and detailed written order, please refer to Medicare's Learning Network (MLN) Matters Number MM8304, updated June 28, 2013**

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## **Oxygen Ordering Guide**

To dispense Oxygen

- ✓ *The beneficiary must be seen and evaluated by the treating physician within 30 days prior to the date of setup.*
- ✓ *Testing must be within 30 days prior to delivery  
(If inpatient, 2 days prior to discharge)*

### **Oxygen Concentrator Only**

1. Verbal or Written Order
2. Qualifying Oximetry
3. Progress Notes

### **Oxygen Concentrator and Portable Oxygen System**

1. Detailed Written Order (Signed) Prior to Delivery
  - a. Example of detailed description of item on Order  
*Oxygen Concentrator, Portable Oxygen System, 2 LPM Continuous Via Nasal Cannula.*
2. Qualifying Oximetry
3. Signed Physician Face-to-Face Encounter

### **Oxygen Concentrator and Portable Homefill System**

1. Verbal or Written Order
2. Qualifying Oximetry
3. Progress Notes

**\*For full listing of all items requiring a Face-to-Face encounter and detailed written order, please refer to Medicare's Learning Network (MLN) Matters Number MM8304, updated June 28, 2013**