

## What about medical equipment and supplies I get from my doctor or hospital?

Medicare will help pay for a walker that your doctor or other provider (including a physician assistant, clinical nurse specialist, or nurse practitioner) gives you, even if he or she isn't a Medicare-contract supplier, as long as the walker is supplied in the office during a visit for medical care.

If you're admitted to a hospital and need a walker, Medicare will also help pay for it if the hospital gives it to you while you're admitted or on the day you're discharged from the hospital even if the hospital isn't a contract supplier.



## I have Medicare and Medicaid. Will Medicaid cover an item I get from a non-contract supplier if Medicare doesn't cover it?

If you have Medicare and Medicaid and live in a competitive bidding area, you'll have to get supplies and equipment from a Medicare-contract supplier. Medicaid will pay the deductibles and coinsurance for those services.

- You may still be able to get supplies and equipment that Medicare doesn't cover, but your state Medicaid program covers, from any Medicaid-participating provider.
- For more information, call or visit your Medicaid office. To get the phone number for your state, visit [Medicare.gov/contacts](http://Medicare.gov/contacts). You can also call 1-800-MEDICARE (1-800-633-4227), and say "Medicaid." TTY users can call 1-877-486-2048.

For more detailed information, visit [Medicare.gov/publications](http://Medicare.gov/publications) to view "Your Guide to Medicare's Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program."

The information in "Medicare's Competitive Bidding Program for Equipment & Supplies" describes the Medicare Program at the time the booklet was printed. Changes may occur after printing. Visit [Medicare.gov](http://Medicare.gov), or call 1-800-MEDICARE (1-800-633-4227) to get the most current information. TTY users can call 1-877-486-2048.

"Medicare's Competitive Bidding Program for Equipment & Supplies" isn't a legal document. Official Medicare Program legal guidance is contained in the relevant statutes, regulations, and rulings.

You have the right to get this information in an alternate format. You also have the right to file a complaint if you feel you've been discriminated against. Visit [www.cms.gov/about-cms/agency-Information/aboutwebsite/cmsnondiscriminationnotice.html](http://www.cms.gov/about-cms/agency-Information/aboutwebsite/cmsnondiscriminationnotice.html), or call 1-800-MEDICARE for more information.

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# Medicare's Competitive Bidding Program for Equipment & Supplies



CENTERS FOR MEDICARE & MEDICAID SERVICES



To check if an item you use is included in the competitive bidding program, or to find out if you live in a ZIP code that is part of the program, visit [Medicare.gov/supplier](https://www.medicare.gov/supplier), or call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

Medicare's Competitive Bidding Program for durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) changes the amount Medicare pays for certain DMEPOS items and which suppliers you can use.

Suppliers who are eligible to provide certain medical equipment and supplies in your area may change. It's important to know if you're affected by this program to make sure Medicare will help pay for your item(s) and to avoid any disruption of service.

**Does the program affect me?**

If you want Medicare to help pay for your item(s), you generally must use Medicare contract suppliers if all of the following apply to you:

- Have Original Medicare
- Live in one of the competitive bidding areas
- Use equipment or supplies included under the program (or get the items while visiting a competitive bidding area)

If you live in one of the competitive bidding areas and you're renting oxygen equipment or certain other durable medical equipment (DME) when the program starts, you can continue renting these items from your current supplier if the supplier:

- Gets a new contract or
- Decides to participate in the program as a "grandfathered" supplier

If you live in (or get these items while visiting) these areas and don't use a Medicare contract or a grandfathered supplier, Medicare probably won't pay for the item, and you may have to pay full price.

**DMEPOS Competitively Bid Items**

Commode chairs	Patient lifts
Continuous Positive Airway Pressure (CPAP) devices and related accessories	Respiratory Assist Devices (RADs) and related accessories
Diabetes testing supplies (mail-order only)*	Scooters and related accessories
Enteral nutrients, equipment, and supplies	Seat lifts
Hospital beds and related accessories	Support surfaces (group 1 and group 2)
Nebulizers (standard) and related supplies	Transcutaneous Electrical Nerve Stimulation (TENS) devices and supplies
Negative Pressure Wound Therapy (NPWT) pumps, and related supplies and accessories	Walkers
Oxygen, oxygen equipment, and supplies	Wheelchairs (standard power or manual) and related accessories

\* Includes all parts of the U. S., including the 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, and American Samoa. Doesn't include glucose meters.

**Do I have to change doctors?**

No. The program doesn't affect which doctors you can use.

**What if I need a specific brand or way of getting a competitively bid item or service?**

If you need a specific brand or type of item or service, your doctor must prescribe the specific brand or type in writing. Your doctor must document in your medical record why you need this specific brand or type of item or service to avoid an adverse medical outcome. In these situations, a Medicare contract supplier must:

- Give you the exact brand or type of item or service your doctor prescribes for you
- Help you find another contract supplier that offers that brand or type of item or service
- Work with your doctor to find a different brand or type of item or service and get a revised written prescription

