

Reimbursement Policy	
Subject: Durable Medical Equipment (Rent to Purchase)	
Policy Number: G-06052	Policy Section: DME and supplies
Last Approval Date: 06/13/2023	Effective Date: 06/13/2023

**** Visit our provider website for the most current version of the reimbursement policies. If you are using a printed version of this policy, please verify the information by going to <https://providers.anthem.com/ny>. ****

Disclaimer

These reimbursement policies serve as a guide to assist you in accurate claims submissions and to outline the basis for reimbursement if Anthem Medicare Advantage covered the service for the member's benefit plan. The determination that a service, procedure, item, etc. is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis as well as to the member's state of residence.

You must follow proper billing and submission guidelines. You are required to use industry standard, compliant codes on all claim submissions. Services should be billed with Current Procedure Terminology® (CPT) codes, Healthcare Common Procedure Coding System (HCPCS) codes, and/or revenue codes. These codes denote the services and/or procedures performed and, when billed, must be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our reimbursement policies apply to both participating and non-participating professional providers and facilities.

If appropriate coding/billing guidelines or current reimbursement policies are not followed, Anthem Medicare Advantage may:

- Reject or deny the claim.
- Recover and/or recoup claim payment.
- Adjust the reimbursement to reflect the appropriate services and/or procedures performed.

These reimbursement policies may be superseded by mandates in provider, state, federal, or Centers for Medicare & Medicaid Services (CMS) contracts and/or requirements. Anthem Medicare Advantage strives to minimize delays in policy

Medicare services provided by Anthem Blue Cross and Blue Shield, trade name of Anthem HealthChoice HMO, Inc. and Anthem HealthChoice Assurance, Inc., Anthem Blue Cross and Blue Shield HP, trade name of Anthem HP, LLC., or Anthem Blue Cross and Blue Shield Retiree Solutions, trade name of Anthem Insurance Companies, Inc.

Independent licensees of the Blue Cross Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. NYBCBS-CR-RP-045847-23 November 2023

implementation. If there is a delay, we reserve the right to recoup and/or recover claims payment to the effective date in accordance with the policy. We reserve the right to review and revise these policies when necessary. When there is an update, we will publish the most current policy to the website.

Policy

Anthem Medicare Advantage allows reimbursement for durable medical equipment (DME) under specific guidelines unless otherwise noted by provider, state, federal, or CMS contracts and/or requirements.

Reimbursement is based on the rental price up to the maximum allowed of the particular DME. The item is considered purchased once the purchase price has been met. There may be instances in which a particular item may be considered for direct purchase on a case-by-case basis.

Components of Rental DME

Supplies and accessory components associated with rental DME are not separately reimbursed and considered all-inclusive in the rental reimbursement.

The reimbursement limit for rented DME for members covered under Medicare products is 13 months. After 13 months, claims submitted for the item will be denied and the item will be considered purchased.

Circumstances Affecting Rental Reimbursement:

- Rental periods that contain a break in coverage of more than 60 days will start the limitation count over.
- On the occasion a member changes suppliers during the rental period, a new rental period will not start over.

Reimbursement for oxygen equipment is allowed for a maximum of 36 months; however, Anthem Medicare Advantage will continue to reimburse for oxygen contents and supplies up to an additional 24 months, as applicable.

Items Not Considered DME

The following items are not considered DME:

- Prosthetics or orthotics
- Disposable medical supplies

Note: This policy does not apply to direct purchase DME.

Nonreimbursable DME

Anthem Medicare Advantage does not allow reimbursement for:

- Provision of DME that exceeds the benefit limit unless authorized through medical necessity.
- Repair or replacement of DME necessitated by abuse or neglect.
- Repair or replacement of DME during the warranty period.
- Enhancements or upgrades of DME for the convenience of the member or caregiver.
- The aesthetic appearance of DME for the preference of the member or caregiver.
- DME considered to be experimental or investigational.
- The purchase or rental of common household items that are not medically indicated.
- DME provided by a skilled nursing facility — this equipment is normally included as part of the facility charge and is not separately reimbursable unless otherwise stated in a provider contract.

Related Coding

Standard correct coding applies

Policy History

06/13/2023	Review approved and effective: policy template updated; added clarification language for oxygen rental
09/14/2020	Review approved and effective
10/26/2018	Review approved and effective: policy template updated
08/24/2015	Initial approval 08/24/2015 and effective 01/01/2016

References and Research Materials

This policy has been developed through consideration of the following:

- CMS
- State contract

Definitions

Durable Medical Equipment (DME)	<p>Items that meet the following criteria:</p> <ul style="list-style-type: none"> • Are primarily and customarily used to serve a medical purpose rather than convenience or comfort. • Can withstand repeated use. • Generally, are not useful to a person without an illness or injury. • Are appropriate for use in the home. • Are prescribed by a licensed physician/practitioner. <p>All requirements in the definition must be met before an item can be considered DME.</p>
---------------------------------	--

Rent-to-purchase	A time period where reimbursement is based on a monthly fee up to the amount that the item will be considered purchased.
Capped rental	An amount reimbursed on a monthly rental basis, which will not exceed the applicable number of continuous months. If the service is billed beyond the maximum number of rental months, no additional reimbursement will be allowed.
General Reimbursement Policy Definitions	

Related Policies and Materials

Reimbursement for Items under Warranty