



0000003

**MEDICARE**

Part A Intermediary

Part B Carrier

December 23, 2010



TEAM POST-OP  
13921 SW 143 CT SUITE 5  
MIAMI FL 33186-5797

NPI: 1730364530  
PTAN: 6465130001

625532 000002  
0001 OF 0002

Dear TEAM POST-OP:

Thank you for applying to the National Supplier Clearinghouse (NSC) as a supplier of Durable Medical Equipment, Orthotics, Prosthetics, and Supplies (DMEPOS). Your application for billing privileges has been approved effective December 17, 2010 for the location listed below and your participation status is Non-participating. Please note each location where a DMEPOS supplier provides Medicare-covered items to beneficiaries must obtain billing privileges.

Federal law (OBRA 1989) requires suppliers to file a claim for all beneficiaries to whom Medicare Part B services have been provided. You will use the National Provider Identifier (NPI) listed on the CMS 855S form to bill the Durable Medical Equipment Medicare Administrative Contractor (DME MACs). The DME MACs have been notified of your approval and information regarding the billing process may be found on their respective Web sites.

Jurisdiction A- NHIC, Corp., [www.medicarenhic.com/dme](http://www.medicarenhic.com/dme)Jurisdiction B- National Government Services, [www.adminastar.com](http://www.adminastar.com)Jurisdiction C- CIGNA Government Services, [www.cignagovernmentservices.com](http://www.cignagovernmentservices.com)Jurisdiction D- Noridian Administrative Services, [www.noridianmedicare.com/dme](http://www.noridianmedicare.com/dme)

To establish electronic claim submission, contact the Common Electronic Data Interchange (CEDI) at [www.ngscedi.com](http://www.ngscedi.com) or 866-311-9184.

You have also been issued 6465130001, which is your Provider Transaction Access Number (PTAN), previously referred to as the NSC supplier number. The PTAN is an identifier to be used when contacting the NSC or the DME MAC(s) with general inquiries. Please note some of the DME MACs may refer to the PTAN as the supplier or legacy number. Suppliers are reminded to register their NSC PTANs with National Plan & Provider Enumeration System (NPPES) once assigned to maintain updated information with all carriers.

**Palmetto GBA****National Supplier Clearinghouse**

Post Office Box 100142 • Columbia, South Carolina • 29202-3142 • (866) 238-9652

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NSCSSUPP

All suppliers are required to maintain compliance with the Medicare DMEPOS supplier standards. To promote a higher level of ethical and lawful conduct within the DMEPOS program, the Office of Inspector General has developed a Program Compliance Guidance ([www.oig.hhs.gov/authorities/docs/frdme.pdf](http://www.oig.hhs.gov/authorities/docs/frdme.pdf)).

Also, all suppliers are required to notify the NSC of any changes to the information provided on the CMS 855S form within 30 days (supplier standard #2). Inaccurate supplier information may impact claims processing.

If you have questions regarding the DMEPOS enrollment process, please contact the NSC at (866) 238-9652. To receive the most updated information directly to your email, register to receive NSC ListServ messages and news articles by visiting [www.PalmettoGBA.com/NSC](http://www.PalmettoGBA.com/NSC).

Sincerely,

Nancy C Parker, Director

TEAM POST OP INC  
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SUITE 5  
MIAMI, FL 33186

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## **MEDICARE DMEPOS SUPPLIER STANDARDS**

**Note:** This is an abbreviated version of the supplier standards every Medicare DMEPOS supplier must meet in order to obtain and retain their billing privileges. These standards, in their entirety, are listed in 42 C.F.R. 424.57(c).

1. A supplier must be in compliance with all applicable Federal and State licensure and regulatory requirements.
2. A supplier must provide complete and accurate information on the DMEPOS supplier application. Any changes to this information must be reported to the National Supplier Clearinghouse within 30 days.
3. An authorized individual (one whose signature is binding) must sign the application for billing privileges.
4. A supplier must fill orders from its own inventory, or must contract with other companies for the purchase of items necessary to fill the order. A supplier may not contract with any entity that is currently excluded from the Medicare program, any State health care programs, or from any other Federal procurement or non-procurement programs.
5. A supplier must advise beneficiaries that they may rent or purchase inexpensive or routinely purchased durable medical equipment, and of the purchase option for capped rental equipment.
6. A supplier must notify beneficiaries of warranty coverage and honor all warranties under applicable State law, and repair or replace free of charge Medicare covered items that are under warranty.
7. A supplier must maintain a physical facility on an appropriate site.
8. A supplier must permit CMS, or its agents to conduct on-site inspections to ascertain the supplier's compliance with these standards. The supplier location must be accessible to beneficiaries during reasonable business hours, and must maintain a visible sign and posted hours of operation.
9. A supplier must maintain a primary business telephone listed under the name of the business in a local directory or a toll free number available through directory assistance. The exclusive use of a beeper, answering machine or cell phone is prohibited.
10. A supplier must have comprehensive liability insurance in the amount of at least \$300,000 that covers both the supplier's place of business and all customers and employees of the supplier. If the supplier manufactures its own items, this insurance must also cover product liability and completed operations.
11. A supplier must agree not to initiate telephone contact with beneficiaries, with a few exceptions allowed. This standard prohibits suppliers from calling beneficiaries in order to solicit new business.
12. A supplier is responsible for delivery and must instruct beneficiaries on use of Medicare covered items, and maintain proof of delivery.
13. A supplier must answer questions and respond to complaints of beneficiaries, and maintain documentation of such contacts.
14. A supplier must maintain and replace at no charge or repair directly, or through a service contract with another company, Medicare-covered items it has rented to beneficiaries.
15. A supplier must accept returns of substandard (less than full quality for the particular item) or unsuitable items (inappropriate for the beneficiary at the time it was fitted and rented or sold) from beneficiaries.
16. A supplier must disclose these supplier standards to each beneficiary to whom it supplies a Medicare-covered item.
17. A supplier must disclose to the government any person having ownership, financial, or control interest in the supplier.
18. A supplier must not convey or reassign a supplier number; i.e., the supplier may not sell or allow another entity to use its Medicare billing number.
19. A supplier must have a complaint resolution protocol established to address beneficiary complaints that relate to these standards. A record of these complaints must be maintained at the physical facility.
20. Complaint records must include: the name, address, telephone number and health insurance claim number of the beneficiary, a summary of the complaint, and any actions taken to resolve it.
21. A supplier must agree to furnish CMS any information required by the Medicare statute and implementing regulations.
22. All suppliers must be accredited by a CMS-approved accreditation organization in order to receive and retain a supplier billing number. The accreditation must indicate the specific products and services, for which the supplier is accredited in order for the supplier to receive payment of those specific products and services (except for certain exempt pharmaceuticals).
23. All suppliers must notify their accreditation organization when a new DMEPOS location is opened.
24. All supplier locations, whether owned or subcontracted, must meet the DMEPOS quality standards and be separately accredited in order to bill Medicare.
25. All suppliers must disclose upon enrollment all products and services, including the addition of new product lines for which they are seeking accreditation.