

# Download Medicare Guide For Modifier For Prosthetics

## Durable Medical Equipment, Prosthetics/Orthotics ...

Medicare payment for durable medical equipment (DME), prosthetics and orthotics (P&O), parenteral and enteral nutrition (PEN), surgical dressings, and therapeutic shoes and inserts is equal to 80 percent of the lower of either the actual charge for the item or the fee schedule amount calculated for the item, less any unmet deductible.

## Medicare Claims Processing Manual

This chapter provides general instructions on billing and claims processing for durable medical equipment (DME), prosthetics and orthotics (P&O), parenteral and enteral nutrition (PEN), and supplies. Coverage requirements are in the Medicare Benefit Policy Manual and the National Coverage Determinations Manual.

## Prosthetic Coverage

Medicare Part B (Medical Insurance) covers prosthetic devices needed to replace a body part or function when a doctor or other health care provider enrolled in Medicare orders them. Prosthetic devices include: Breast prostheses (including a surgical bra). One pair of conventional eyeglasses or contact lenses provided after a cataract operation.

## Equipped to Get Paid: Billing for DME, Orthotics, and ...

That said, many [if not most] commercial insurance payers align themselves with Medicare policies, so this should serve as a good general guide.) For prosthetics, Medicare reimbursement includes: evaluation, fitting, parts and labor, repairs due to normal wear or tear within the first 90 days of the delivery date, and

## Prevea360 Health Plan Modifier Requirements for Durable ...

Prevea360 Health Plan Modifier Requirements for Durable Medical Equipment, Prosthetics, Orthotics and Supplies Providers are required to follow Centers for Medicare and Medicaid Services (CMS) requirements for proper modifier usage when submitting charges for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS). ...

## Modifier Reference Policy, Professional (2/10/2019)

Modifier Reference Policy, Professional ... Centers for Medicare and Medicaid Services (CMS) or other coding guidelines. References to CPT or other sources are for definitional purposes only and do not imply any right to reimbursement. ... and Orthotic/Prosthetic Devices Durable Medical Equipment, Orthotics and Prosthetics Multiple Frequency ...

## Modifiers

Modifiers can be alphabetic, numeric or a combination of both, but will always be two digits for Medicare purposes. Some modifiers cause automated pricing changes, while others are used to convey information only.

## **Replacement**

RB - Replacement of a part of DME as part of a repair; When billing a replacement accessory for the main piece of equipment, suppliers must bill the RB modifier (replacement of a part of DME, orthotic or prosthetic item furnished as part of a repair) and provide a detailed explanation as to why the accessory is being replaced.