



July 10, 2018

***Via email to: [Connie.Leonard@cms.hhs.gov](mailto:Connie.Leonard@cms.hhs.gov)***

Connie Leonard  
Deputy Director, Provider Compliance Group  
CMS Center for Program Integrity  
7500 Security Boulevard  
Baltimore MD 21244

**Re: CMS Expansion of PMD Prior Authorization**

Dear Ms. Leonard:

Thank you for meeting with us recently to discuss certain issues related to program integrity and provider compliance. We are following up on some of the issues we discussed about CMS' expansion of the prior authorization (PA) program to power mobility devices (PMDs).

The American Association for Homecare (AAHomecare) is the national organization for durable medical equipment, infusion therapy, prosthetics, orthotics, and supplies (DMEPOS) suppliers, manufacturers, and other stakeholders in the homecare community. Our membership participates in the PMD PA demonstration. We are strong supporters of programs that streamline services and improve access to timely, quality care for Medicare beneficiaries.

Since the inception of the PA demonstration in September of 2012, we have received positive feedback from participating suppliers on the process, especially in regard to physician education. As such, we strongly support CMS' decision to extend the demonstration into a nationwide PA program starting September 1, 2018. Along with the expansion, however, we strongly recommend that CMS continue to allow suppliers to make sure that physicians can be kept informed, concurrently, of the DME MACs affirmation or non-affirmation decisions.

The PMD PA Demonstration has allowed for the prescriber to get a copy of the affirmation and/or non-affirmation letter which has proven to be one of the best components of the process. Specifically, the non-affirmation letter informs the physician of the reasons for the decision, which allows him or her to learn more about Medicare requirements and enables the prescriber to stay informed about his/her beneficiary's care.

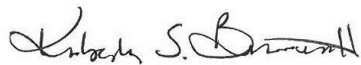
The non-affirmation letters being sent to the beneficiary and the prescriber has been crucial to the success of the process and must be ensured to continue in the nationwide expansion of the PA program.

Physicians/clinicians are authoring more focused and detailed medical records based on feedback provided directly from the DME MACs within the context of prior authorization determination letters. Beneficiaries are more aware of the Medicare requirements due to this process which has proven to set appropriate expectations for Medicare beneficiaries.

During our recent meeting, you indicated that when the PMD PA program expands nationwide September 1, 2018, CMS will not be continuing the practice of allowing the prescriber to receive directly from the DME MAC a copy of the affirmation or non-affirmation decision. As explained above, this is a critical component of the success of the PA program. Last summer when CMS implemented the first two items to the national PA program, AAHomecare successfully worked with the Provider Compliance Group to allow prescribers to request a decision letter to the DME MACs. Although we have been informed that CMS' counsel believes automatically sending a decision letter to prescribers is a Health Insurance Portability and Accountability Act violation, we would appreciate more detailed information on this and would like the opportunity to further discuss options to allow prescribers to be informed through the new PA program.

We look forward to further discussions on this issue. Please feel free to contact me if I can answer any questions about our comments above.

Sincerely,

A handwritten signature in black ink, appearing to read "Kimberley S. Brummett". The signature is fluid and cursive.

Kimberley S. Brummett, MBA  
Vice President of Regulatory Affairs  
American Association for Homecare