Via Electronic Mail

October 31, 2012

The Honorable Kathleen Sebelius
Secretary of U.S. Department of Health and Human Services
Room 120F, Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Re: Authority to Grant Administrative Relief from Medical Review (MR) During a Disaster\(^1\) for Providers Impacted by Hurricane Sandy

Dear Madam Secretary:

The American Association for Homecare (AAHomecare) respectfully requests that you exercise your authority to direct Medicare contractors to grant temporary administrative relief from medical review for durable medical equipment (DME) providers located in disaster areas impacted by Hurricane Sandy. President Obama has signed emergency declarations related to the hurricane in the following states: Connecticut, Delaware, Maryland, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Virginia, West Virginia, and the District of Columbia.

The Centers for Medicare and Medicaid Services’ (CMS) Medicare Program Integrity Manual (PIM) gives Medicare Administrative Contractors (MACs) and Recovery Audit Contractors (RACs) the authority to provide administrative relief from medical review when disasters occur. According to PIM Chapter 3.8, “In the event of a disaster, MACs and Recovery Auditors shall grant temporary administrative relief to any affected providers for up to 6 months (or longer with good cause).” Based on the widespread destruction, flooding, and power outages caused by Hurricane Sandy, we believe that it is imperative that the MACs and RACs immediately grant temporary administrative relief from medical review for all DME providers in these affected areas for a period of 60 days.\(^2\)

Following this 60-day period, we request that the MACs and RACs evaluate whether an additional extension in the moratorium is necessary. We also ask that the MACs and RACs grant an additional six

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\(^2\) PIM chapter 3.8 states: “The MACs and Recovery Auditors shall stop sending ADR letters to providers who have been directly affected for at least 60 calendar days. The MACs and Recovery Auditors shall allow up to an additional six months beyond the original due date for the submission of requested records.”
months documentation submission extension for any ADRs sent to these providers once medical review is reinstated, as stipulated by the PIM.

Additionally, to alleviate unnecessary denials for DME providers that may have already received ADRs from RACs and DME MACs, AAHomecare requests that you direct the MACs and RACs to extend the additional ADR response time to 90 calendar days. We request that such a policy be applied to all ADRs sent to DME providers in states impacted by the hurricane retroactive to letters dated on or after October 12, 2012. Our providers report that ADR letters sent by MACs and RACs are often received ten to 14 days after the date on the letter under normal circumstances so the 90-day response time must be applied retroactively to account for ADRs that will not be received in a timely fashion due to the hurricane.

The Association recognizes the extraordinary nature of these requests but given the circumstances created by Hurricane Sandy, we believe that they are warranted so that DME providers can focus their full attention on helping Medicare beneficiaries.

We appreciate your prompt attention to these requests and look forward to working with you in protecting Medicare and the beneficiaries it serves.

Sincerely,

Tyler J. Wilson
President & CEO

CC: Marilyn Tavenner, Acting Administrator, CMS