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By Nina Youngstrom

◆ In a new answer to a frequently asked question, CMS sheds a little light about how its contractors will perform medical reviews when the COVID-19 public health emergency (PHE) is over.<sup>[1]</sup> During the PHE, the recovery audit contractors, Medicare administrative contractors and the supplemental medical review contractor applied flexibility across claims types. “For certain DME items, this included the non-enforcement of clinical indications for coverage. Since clinical indications for coverage were not enforced for certain DME items provided during the PHE, once the PHE ends CMS plans to primarily focus reviews on claims with dates of service outside of the PHE, for which clinical indications of coverage are applicable. We note that we may still review these DME items, as well as other items or services rendered during the PHE, if needed to address aberrant billing behaviors or potential fraud,” CMS said.

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