



SUNDAY MONDAY TUESDAY **WEDNESDAY** IN WASHINGTON THURSDAY FRIDAY SATURDAY

September 29, 2004

Urge Members of Congress to Champion Homecare by Cosponsoring H.R. 4491

We are down to the wire for signing on cosponsors for HR 4491, the Hobson-Ford bill to repeal cuts to reimbursement for oxygen, nebulizers, hospital beds, air mattresses, wheelchairs, and other items. Make sure your Member of Congress is a champion of homecare and cosponsors the bill. See details and cosponsors at www.aahomecare.org.

CMS Will Develop Guidance Documents for National Coverage Determinations

The Centers for Medicare and Medicaid Services (CMS) will begin to develop guidance documents that will make available to the public factors considered in making a determination as to whether an item or service is reasonable and necessary.

Required by section 731 of the Medicare Modernization Act of 2003, the guidance documents would provide detailed information on the national coverage determinations (NCD) process, evaluation and decision-making factors, and interpretations of the statute. The guidance documents will not serve as a comprehensive analysis of all factors and issues that might affect NCDs and are not intended to be binding documents on the agency or public.

The public will have an opportunity to comment on each document issued. CMS will be providing a list of possible topics for guidance documents on its website at www.cms.hhs.gov/coverage. To view the federal register notice go to: <http://a257.g.akamaitech.net/7/257/2422/06jun20041800/edocket.access.gpo.gov/2004/pdf/04-21197.pdf>

CMS Asks for Public Comment on Certificates of Medical Necessity

In a *Federal Register* notice, CMS asks for public comment on certificates of medical necessity (CMN) in two areas:

- Oxygen CMN (484);
- CMNs and supporting documentation (846-849, 10125, 10126). In the *Federal Register* notice, CMS also notes that form numbers 851, 852, and 853 have been replaced with new numbers. Form 851 is now 10125, and Forms 852 and 853 are now 10126.

For details and related forms go to: www.cms.hhs.gov/regulations/pr/.

Written comments must be submitted within 60 days of September 21, 2004 to the CMS Paperwork Clearance Officer at: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Attn: Melissa Musotto, Room C5-14-03, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. See Register notice at: <http://a257.g.akamaitech.net/7/257/2422/06jun20041800/edocket.access.gpo.gov/2004/pdf/04-21027.pdf>

GAO Faults CMS PPO Demonstration

The GAO issued a report this week faulting a large Medicare PPO demonstration project for not allowing beneficiaries to obtain plan services from providers of their choice. The report noted, "Despite CMS' efforts, demonstration PPOs have not yet proven to be an attractive option for beneficiaries for the Medicare program."

See www.gao.gov/cgi-bin/getrpt?GAO-04-960.