

# Navigating the DME Landscape

Complex rules often necessitate an enrollment expert.

BY PAUL KESSELMAN, DPM

Thankfully, we've made it through a harsh winter in most areas of the country and you are reading this while the flowers and trees are budding. Unfortunately, some recent news from CMS (as provided by the enrollment carrier (NPE) was not a harbinger of a springtime rebirth. The long-promised debut of PECOS 2.0—which would have facilitated an easier initial enrollment and re-enrollment into Medicare (both Local and DME)—has been postponed yet again, to no sooner than the winter of 2026. This update has the potential to smooth out the enrollment process significantly. PECOS 2.0 will also be more user-friendly and provide huge upgrades in safeguarding your profile data. However, CMS, due to budgetary constraints, has had to postpone its debut.

A recent call with the DMEPOS enrollment carrier (NPE) also reviewed providers submitting applications for providing DMEPOS in multiple states. They informed the

council that these applications are automatically red-flagged. This is especially true when there are licensure requirements for one of the selected states, but the provider is based in a non-licensure state. This

to your New York office, the patient does not wish to return to New York for dispensing. Instead, they ask if the prosthesis may be shipped to their home in New Jersey. They further agree not to wear

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has resulted in significant delays for many providers.

Let's look at a common scenario where this may occur in your practice. A patient sees a New York-based and licensed podiatrist for replacement of an L5000 (toe filler) prosthesis. The patient's foot is scanned and the new scan exactly or closely matches a previous scan taken about a year ago. The patient lives in New Jersey which, unlike New York, requires a licensure for providing lower limb prosthetics. When contacted to come

the device until it is formally dispensed by you via a video telemedicine appointment.

This is problematic for several reasons.

1) The patient requiring an L5000 prosthetic is most likely a high-risk patient. Even if you carefully conduct a fitting examination during a video telemedicine visit, this may have tragic consequences. This is not advisable from a risk management scenario. Additionally, if adjustments are required, you will need to have

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the patient ship it back to you, only requiring you to either adjust it and ship it back to them, or have you ship it to your central fabrication laboratory—which can ship it directly to the patient or back to you for shipment to the patient. This dizzying array of maneuvers will still require yet another telemedicine exam for dispensing. This is not a scenario suggesting a good outcome. Assuming there are no issues with the fit, let us proceed to 2-4.

2) Does the provider have a New Jersey license to practice podiatry? This is critically important because New Jersey is one of approximately 20 states requiring licensure for prosthetics. If the NY-based provider does not have a New Jersey license to practice podiatry or provide prostheses, then they can be accused of practicing podiatry or prosthetics without a license.

3) During the enrollment process, will the NPE carrier ask for a New Jersey license if the provider stip-

and not be paid. In the case of a post-payment audit, you will be required to refund money back. In both cases you will also be out the laboratory fee you paid for the device. Some may simply take the chance that they won't be audited by the carrier. But certainly, there are other entities such as CERT and RAC which may also come knocking at your door. Is it really worth the risk?

5) Additionally, if you did dis-

found sophisticated ways of hacking your bank account with your hard money being diverted directly to the criminals' accounts.

Any change in EFT now requires notification to the NPE carrier via a change of information in PECOS and will take no less than 30 days for them to process.

It is important that you and your staff remain vigilant and suspicious of all incoming email. Be wary that many emails or texts may appear to come from trusted contacts, but in

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ulates that they provide services in New Jersey or any other state which has a licensure requirement? During the enrollment process you are asked which jurisdiction and states you provide services in. Failing to provide a New Jersey license will result in a minimum of a delay in the application process while the NPE carrier attempts to sort out this issue. This can result in delays of more than three months or more, jeopardizing your re-enrollment or initial enrollment.

4) What if the New York provider does not state that s/he provides services in New Jersey or other licensure states and s/he goes ahead and ships the device to the patient? If the claim is audited by Noridian (the payer), this may be problematic. In the case of a pre-payment audit, you will fail the audit

cine exam, the service address on the written proof of delivery must correspond to the patient's home address and not your office address. This is a departure from most podiatric practices that should be using

fact do not. Be wary of downloading any suspicious attachments. Do not open suspicious email or texts and instead immediately discard them. Personal email should not be answered on office computers nor should office staff be permitted to use their personal digital equipment (cell phone, tablet, etc.) on office Wi-Fi. Carefully consider your choices in installing malware and antiviral software. There are many who offer these services to our colleagues. Skimping on hard and software protection is ill-advised.

The application process for DME had become more and more arduous. The revenue you will generate as a DME provider far outweighs the fraction of the costs paid to an enrollment expert! This cannot be overstated. PM

their office address on the written proof of delivery. The place of service on the bill still should correspond to home (POS = 12). These are just too many issues to have to explain to an auditor.

6) It is important to note that the interstate compact that applies and protects physicians' services performed across state lines (telemedicine) does not apply to DME services.

7) One may find an interactive database on state licensure requirements at: <https://www.palmettogba.com/palmetto/npewest.nsf/DID/P4LF7PNQM8?Open>

Another issue discussed during this most recent National Provider Enrollment (NPE) conference pertained to protecting your banking information and electronic funds transfer (EFT) account. Criminals have



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