



'Care Share

Medicare's National Mail-Order Program for Diabetic Testing Supplies

What's the National Mail-Order Program?

Starting July 2013, Medicare will implement a National Mail-Order Program for diabetic testing supplies. This program is designed so you can continue getting quality supplies while saving money. When it starts, you'll need to use a Medicare national mail-order contract supplier for Medicare to pay for diabetic testing supplies that are delivered to your home. If you don't want diabetic testing supplies delivered to your home, you can go to any local store (local pharmacies or storefront suppliers) that's enrolled with Medicare and buy them there.

The national mail-order program will include all parts of the U. S., including the 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, and American Samoa.

Will my coinsurance be different if I buy my supplies at a store instead of having them delivered?

No. Medicare's allowed payment amount will be the same for diabetic testing supplies you buy at the store or have delivered to your home.

National mail-order contract suppliers can't charge you more than any unmet deductible and 20% coinsurance. Local stores also can't charge more than any unmet deductible and 20% coinsurance if they accept assignment, which means they accept the Medicare-approved

amount as payment in full. Local stores that don't accept Medicare assignment may charge you more than 20% coinsurance and any unmet deductible. If you get your supplies from a local store, check with the store to find out what your payment will be or if the store accepts assignment. This means that they agree to accept the Medicare-approved amount as full payment for covered supplies.

How can I find out which suppliers I can use?

To find a National Mail-Order Program contract supplier, visit Medicare.gov/supplier. You can also call 1-800-MEDICARE (1-800-633-4227) for help finding a contract supplier. TTY users should call 1-877-486-2048.

Am I affected if I'm in a Medicare Advantage Plan?

No. The National Mail-Order Program applies to Original Medicare only. If you're enrolled in a Medicare Advantage Plan (like an HMO or PPO), your plan will let you know if your supplier is changing. If you're not sure, contact your plan.

What if I need a specific item or supply?

If you need a specific item or brand of supply, or a specific form, your doctor must prescribe the specific brand or form in writing. Your doctor must also document in your medical record that you need this specific supply for medical reasons. In

The Senior Medicare Patrol (SMP) helps to educate Medicare beneficiaries about ways to prevent, detect, and combat Medicare fraud. For more information about Medicare fraud, visit the Stop Medicare Fraud website at www.stopmedicarefraud.gov.

these situations, a Medicare contract supplier is required to:

Give you the exact brand or form of item you need

Help you find another contract supplier that offers that brand or form

Consult with your doctor to find an alternative brand or form, and get a revised written prescription from your doctor

My doctor hasn't prescribed a specific brand of glucose monitor, but I like the one I'm using. Can my contract supplier switch me to a different brand?

No. Contract suppliers can't make you switch to another glucose monitor and testing supplies brand. Contract suppliers must furnish the brand of testing supplies that works with your monitor. If the contract supplier doesn't carry your brand of testing supplies, you can ask the contract supplier about other brands they offer. However, the supplier can't give you this information about alternative brands unless you ask.

How does Medicare pay for supplies if I have other insurance?

If your primary insurance policy requires you to use a supplier that doesn't participate in the mail-order program, Medicare may make a secondary

payment to that supplier. The supplier must meet Medicare enrollment standards and be eligible to get secondary payments. For more information, check with your insurer, plan provider, or benefits administrator.

I've been getting phone calls from suppliers I've never used asking me to switch suppliers. Is this allowed?

Medicare has rules to protect you from unsolicited phone calls from suppliers. If you think you've been pressured to switch suppliers:

Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

Call the Fraud Hotline of the HHS Office of Inspector General at 1-800-HHS-TIPS (1-800-447-8477). TTY users should call 1-800-377-4950.

What should I do if I get phone calls offering me free diabetic supplies or if I get items in the mail that I didn't order?

If either of these things happen, you should:

Protect your Medicare number and other personal information. Don't give your Medicare number or other personal information to anyone who calls you.

Don't accept items that you didn't order. You should

refuse the delivery and/or return it to the sender. Keep a record of the sender's name and the date you returned the items.

Call the Fraud Hotline of the HHS Office of Inspector General at 1-800-HHS-TIPS.

How can I help Medicare fight fraud?

When you get health care services, save your receipts and statements to check for mistakes. Compare this information with your claims to make sure you or Medicare weren't billed for services or items you didn't get. The sooner you see and report errors, the sooner we can stop fraud.

Medicare has several easy ways for you to review your claims:

Check your "Medicare Summary Notice" (MSN) or any statements you get from your Medicare plan.

Visit MyMedicare.gov.
Call 1-800-MEDICARE.

If you suspect fraud, call 1-800-MEDICARE. You can also visit oig.hhs.gov or call the fraud hotline of the Department of Health and Human Services Office of Inspector General at 1-800-HHS-TIPS.

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