Oxygen and Oxygen Equipment

Dear Clinician,

Please document the following information in your patient's medical record to allow Medicare to pay his/her oxygen equipment and contents.

1. The qualifying blood gas study (if the qualifying test was done at sleep, the patient will not qualify for portable oxygen).
2. If testing occurred during exercise, there must be documentation of three (3) oxygen studies in the patient's medical record – i.e., testing at rest without oxygen, testing during exercise without oxygen, and testing during exercise with oxygen applied (to demonstrate the improvement of the hypoxemia). All 3 tests must be performed within the same testing session. The record must show improvement of the saturation level with oxygen.
3. At the initial onset of oxygen usage, a clinician’s office evaluation within 30 days prior to the initial certification date.
4. A reevaluation within 90 days of recertification.
5. The patient's continued need and management of his/her oxygen equipment.
6. The method of delivery, e.g., cannula or mask.

Medical records must be complete and legibly signed and dated with the clinician’s name clearly indicated in the documentation and on the order.

Note: We encourage you to provide this documentation to the DME supplier along with your order, so that the supplier can be assured that the beneficiary has met all Medicare payment requirements.

Supplier's questions regarding this may be answered by calling the Noridian DME Contact Center.

Beneficiary's questions regarding this may be answered by calling 1-800-MEDICARE (1-800-633-4227).

Refer to the Oxygen and Oxygen Equipment LCD and Policy Article and the Supplier Manual for additional information.

Sincerely,

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