

## **Durable Medical Equipment Alert: What is your state doing to smooth access for dual eligibles?**

Justice in Aging needs your help to identify best practices and state innovations around service delivery for durable medical equipment to individuals who qualify for both Medicare and Medicaid benefits. Dual eligible individuals regularly fall into an access gap while waiting for Medicaid to approve a needed item. We are working with advocates from several national organizations to identify and share best practices with states and the Centers for Medicare and Medicaid Services.

*The problem: Mr. Jones, a dual eligible, needs an expensive wheelchair. His DME supplier is unwilling to supply the wheelchair without knowing whether the supplier will be paid. But Medicare will not process the claim until after the wheelchair is delivered and Medicaid will not review its coverage until after there is a Medicare rejection. Mr. Jones, who does not have the funds to pay up front for the wheelchair, is stuck. Only after persistent advocacy, the state agrees to a one-time override to get Medicaid authorization but the problem remains for the next person in Mr. Jones' position.*

Because Medicaid is the payer of last resort, dual eligible individuals often must wade through the intricate process of provider submissions, Medicare rejection, and eventual Medicaid processing and delivery before receiving a needed item.

Recognizing the financial and health strain this places on dual eligibles, some states have taken steps to decrease DME denials and delays. For example, Connecticut's pre-authorization process in Medicaid addresses the requirement for Medicare rejection before Medicaid review. California's Medicaid uses a list of equipment Medicare never authorizes to clarify when Medicaid review can proceed without first processing a claim through Medicare.

**Please help us.** Justice in Aging is looking for other smart state practices to share with states and the Centers for Medicare and Medicaid Services. Similarly, stories to help illustrate the problem when Medicare and Medicaid procedures bump up against each other will help advocates strategize about potential solutions. Please send any examples to Georgia Burke at [GBurke@JusticeinAging.org](mailto:GBurke@JusticeinAging.org). Thank you!