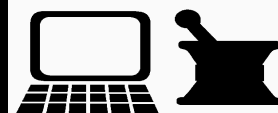


DME Notes



P.C. Solutions

December 27, 2005

Deductible information for users of RxDME2000 and DMEFree

As you may know every Medicare beneficiary with Part B coverage has an annual deductible which resets every January 1st. Effective 01/01/2006 the deductible will be increased from \$110 to \$124. Any claims for Part B covered benefits submitted by a pharmacy or DME supplier are subject to this deductible.

This is why it is important that you make sure that, when a Medicare beneficiary does have an outstanding deductible balance, it either be picked up by a beneficiary's supplemental coverage or, if possible, your claim be billed unassigned and the full amount be collected from the beneficiary at the point of sale.

The Solution to the problem...

The identification of deductible amounts can be done using our Online Eligibility system. Last week we sent out a Free offer to give you 5 free eligibility checks valid now through January 31, 2005. You can use the Free offer to check the Medicare deductible! The Free checks are to illustrate the power of our forthcoming Real time eligibility option.

How it is done...

The deductible balance is determined by submitting a Real Time eligibility request to Medicare based on the patient information you submit. If a match is found in Medicare's records and the beneficiary is eligible, the response will include the beneficiary's deductible balance, which is used to determine if the beneficiary should be charged up front.

Who can take advantage of this...

Only Non-Participating Medicare providers are eligible to utilize deductible information. This is because Participating Medicare providers are required by statute to accept assignment on every claim billed to Medicare. To inquire about your store's participation status you may call the National Supplier Clearinghouse (NSC) at 866-238-9652 or visit the CMS Supplier Directory at www.medicare.gov/Supplier/Home.asp. Note, It is required by statute that you accept assignment on all claims for drugs and biologicals, no matter your participation status.

Take advantage of our Free ONLINE ELIGIBILITY OFFER!

Up to 5 Free Real Time Eligibility checks per business during the month of January.

Simply fax us (for emails are not secure) the attached sheet completed. Use it to check the eligibility of a patient as the need arises and we'll fax back the results of the CMS eligibility response. Our fax# is 860 974 1886

Every attempt will be made to return the results within an hour during normal business hours.

Obtaining patient eligibility information is critical to successful claim billing. We hope you will sign up for our new service, once this option is turned on you will have the response in under 5 seconds! No more hours on the phone, wasted time, losing money on equipment that shouldn't have been bill. This service is only for CMS Medicare. You will receive verified address, Date of Birth, gender, Part B coverage, deductible data and so much more.

To recap:

Eligibility checking can be used for

1. Deductible checking / tracking before the sale, allowing you to not accept assignment until deductible is met.
2. Verify Medicare B coverage before the client walks out with the equipment.

Thank you for your business in 2005, we look forward to serving your HME / DME billing needs in 2006!

Mike

DME Notes



P.C. Solutions

December 27, 2005



LOGIN HELP

If your software expires or tells you it will soon expire...

1. Don't panic
2. Contact tech support at

Support@dmeffree.com

to request a new activation code

3. If you need the code ASAP then go to

www.dmeffree.com

At the top of the home page there is a table with options for obtaining a temporary emergency code.



Eligibility Request Form

Please write neatly;

From: Business: _____

State: _____ Phone#: _____

Provider# _____

Requested by: _____ Account# if known _____

Fax number: (_____) _____

Patient Name as it appears on Medicare card:

Patient Birth Date: _____ / _____ / _____ mmddyyyy

Medicare number: _____

Date of Service From: : _____ / _____ / _____

Date of Service To: _____ / _____ / _____

Fax to : PC Solutions / DMEFree 860 974 1886