

## **Place of Service**

CMS Manual System, Pub. 100-04, Medicare Claims Processing Manual, Chapter 26, §10.5

For DMEPOS claims, the place of service is considered to be the place where the beneficiary will primarily use the DMEPOS item. Coverage for any DMEPOS items will be considered if the place of service is:

01	Pharmacy
04	Homeless Shelter
12	Home
13	Assisted Living Facility
14	Group Home
16	Temporary Lodging
33	Custodial Care Facility
54	Intermediate Care Facility/Individuals with Intellectual Disabilities
55	Residential Substance Abuse Treatment Facility
56	Psychiatric Residential Treatment Center
65	End Stage Renal Disease Treatment Facility (valid POS for Parenteral Nutritional Therapy)

Coverage consideration for DMEPOS items in a Skilled Nursing Facility (31), unless the beneficiary is in a covered Part A stay<sup>\*\*</sup>, or a Nursing Facility (32) is limited to the following:

- Prosthetics, orthotics, and related supplies
- Urinary incontinence supplies
- Ostomy supplies
- Surgical dressings
- Oral anticancer drugs
- Oral antiemetic drugs
- Therapeutic shoes for Diabetics
- Parenteral/enteral nutrition (including E0776BA, the IV pole used to administer parenteral/enteral nutrition and supplies)
- Immunosuppressive drugs