



Client's Name: \_\_\_\_\_

Ship Date: \_\_\_\_\_

## Medicare Capped Rental and Inexpensive or Routinely Purchased Items Notification for Services on or after January 1, 2006

I received instructions and understand that Medicare defines the items indicated below that I received as being either a capped rental or an inexpensive or routinely purchased item.

☐ **ENTERAL FEEDING PUMPS:** \_\_\_\_\_

- A Medicare beneficiary may elect to purchase an enteral pump at any time. You will be offered the opportunity to do so by the tenth month.
- If the purchase option is chosen, the ownership of the enteral feeding pump is transferred to the Medicare beneficiary; it is the beneficiary's responsibility to arrange for any required equipment service or repair.
- If the rental option is chosen, Medicare will pay a monthly rental fee for a period not to exceed 15 months. The Medicare beneficiary is not responsible for any required equipment service or repair.
- I select the:

Purchase Option

☐

Rental Option

☐

☐ **FOR CAPPED RENTAL ITEMS:** \_\_\_\_\_

- Medicare will pay a monthly rental fee for a period not to exceed 13 months, after which ownership of the equipment is transferred to the Medicare beneficiary.
- After ownership of the equipment is transferred to the Medicare beneficiary, it is the beneficiary's responsibility to arrange for any required equipment service or repair.
- Examples of this type of equipment include: Suction Machines.
- I select the:

Purchase Option

☐

Rental Option

☐

☐ **FOR INEXPENSIVE OR ROUTINELY PURCHASED ITEMS:** \_\_\_\_\_

- Equipment in this category can be purchased or rented; however, the total amount paid for monthly rentals cannot exceed the fee schedule purchase amount.
- Examples of this type of equipment include: IV poles.
- I select the:

Purchase Option

☐

Rental Option

☐\_\_\_\_\_  
Beneficiary Signature\_\_\_\_\_  
Relationship\_\_\_\_\_  
Date