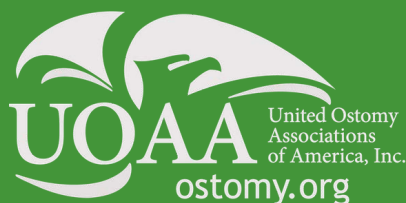


MEDICARE COMPETITIVE BIDDING

WHAT YOU NEED TO KNOW



BACKGROUND

At the end of 2025, the Centers for Medicare & Medicaid Services (CMS) finalized the CY 2026 Home Health and DMEPOS Competitive Bidding Program (CBP) rule. The rule states that ostomy and urological supplies are mandated for inclusion in the competitive bidding program.

The CBP, created by Congress, is intended to lower Medicare costs by having suppliers compete on price. We believe ostomy and urological supplies should be excluded. Competitive bidding could limit access to the specific products individuals need, increasing the risk of leaks, odor, skin complications, and reduced quality of care. Cost savings should not come at the expense of patient health and safety.

There is no immediate impact on Medicare beneficiaries. You should continue ordering your ostomy and urological supplies as usual. Any changes related to this rule would not take effect until January 1, 2028.

Listed here are frequently asked questions, which will be updated as needed.

FREQUENTLY ASKED QUESTIONS

Will my ostomy supplies still be covered under Medicare?

Yes, ostomy supplies remain a covered benefit under Medicare. There are no changes to Medicare's coverage of ostomy supplies.



When will this change affect me?

The change in how you order supplies will not take effect until January 1, 2028. CMS plans to begin educating beneficiaries in late summer or early fall of 2027.

If I don't use one of contracted "in-network" suppliers, will my ostomy supplies be covered?

No, they will not be covered.

How many suppliers will I have access to under the Competitive Bidding Program?

Based on 2023 utilization data, CMS estimates it will award 8 contractors for ostomy supplies to cover the entire nation. Items will be shipped to beneficiary homes and if a contracted supplier has a local location, a person could pick up their supplies. Suppliers are not required to have a physical location near beneficiaries.



Will I have to switch suppliers?

When the program begins in 2028, if your current supplier was not awarded a contract, then you will need to choose a new supplier from the list of contracted suppliers under the Competitive Bidding Program. You can use any contracted company to get your supplies.

If my MD (or PCP) specifically prescribes my products will I be able to get them?

Yes. The Competitive Bidding Program includes a special beneficiary safeguard to ensure that beneficiaries have access to specific brands or modes of delivery of competitively bid items in the product category when needed to avoid an adverse medical outcome. For further guidance refer to the [Physician or Treating Practitioner Authorization Process](#).



If my supplier does not furnish them, what recourse do I have to get my supplies?

Call 800-Medicare to make a complaint. This may trigger an additional review by Medicare of the contracted supplier (or hold the contracted supplier accountable).

Will I be forced to use supplies from a particular manufacturer?

No. Not according to the CMS beneficiary safeguard above.



Will we be able to continue to order custom accessories such as ostomy belts and pre-cut barriers with the suppliers who are awarded the contracts?

There are no changes to Medicare's coverage of ostomy supplies. If the supplies/accessories are a covered benefit under the Medicare policy for ostomy supplies, then you can continue to order them through your supplier. If the item is not covered by Medicare, you can purchase them from any supplier, but you will be responsible for paying out of pocket. Medicare has not specified at this point which accessory products will be included in the program.

If I also need other medical supplies, will I have to get my products from multiple supply providers?

You may have to work with multiple contracted suppliers to get the various DME needed (e.g., one for urological supplies, another for an off-the-shelf knee brace etc.) if the same company wasn't contracted for everything you need or if you prefer working with a certain contracted supplier for a particular product category.

If an ostomate needs ostomy supplies and a non-bid item like a wheelchair, you would have to use a contracted company for the ostomy supplies category but could use any Medicare-billing company that provides the non-bid items. The next round of competitive bidding product categories will be for:

- Class II Continuous Glucose Monitors (CGMs) and Insulin Pumps
- Urological Supplies
- Ostomy Supplies
- Hydrophilic Urinary Catheters
- Off-The-Shelf (OTS) Back Braces
- OTS Knee Braces
- OTS Upper Extremity Braces



If I have a Medicare Advantage (MA) Plan, am I impacted by the Competitive Bidding Program?

Only Original Medicare (aka traditional Medicare) beneficiaries are impacted. However, down the road MA plans may choose to limit you to certain suppliers or reduce the reimbursement rates on the supplies that they cover. As a result, you may face less choice and less access. Other health plans typically mirror Medicare policies.

What can I do to ensure access to my correct supplies?

- ✓ Ensure your prescribing clinician checks the "no product substitution" or "dispense as written" box on the prescription form or writes this on your prescription
- ✓ Examine the wording of the prescription your clinician has written for your ostomy supplies, and make sure it specifies the exact brand and model numbers of the supplies you use, rather than a more generic description
- ✓ Ensure your medical records includes the same information with the exact brand and model numbers of the supplies you use as well as the reason why the specific brand is necessary to avoid an adverse medical outcome



Is it possible to reverse this decision prior to 2028?

With key stakeholders including industry, supply providers, and patient advocacy organizations, UOAA will continue to advocate against the CMS ruling to include ostomy and urological supplies in the Competitive Bidding Program with a multi-prong unified approach including both government affairs and public affairs campaigns that are still being developed.

What can I do to help?

Stay abreast of the advocacy efforts [here](#). [Join](#) UOAA's Advocacy Network so you can take action when we have any federal campaigns and [sign-up](#) for UOAA's monthly ENewsletter. We are also collecting testimonials for the public awareness campaigns and meetings/materials with key decision makers and elected officials. Share your personal story [here](#).

Patients have the right to ask questions and express concerns about access to care. You can also:

- Speak with your Medicare counselor
- Contact 1-800-MEDICARE with questions
- Share your concerns with your elected representatives, if you choose. You can find your legislators at www.ostomy.org/find-your-legislator/

