



Provider Referral Guide

Durable Medical Equipment & Medical Supplies

Serving Maryland, Washington, D.C. & Northern Virginia

ACCEPTED PAYERS

Medicare

Maryland Medicaid

Virginia Medicaid

Priority Partners

Cigna

Cash Pay



Accredited DMEPOS Supplier

Accredited through The Compliance Team.



Office Phone

(240) 607-3076



Referral Fax

(301) 560-5444



Emails

General:
info@
ascendmedicalsolution.com
Referrals:
referrals@
ascendmedicalsolution.com



Website

www.
ascendmedicalsolution.com

Why Providers Choose Ascend



Referral Coordination

Dedicated intake, benefits review, documentation follow-up, and provider communication.



Payer Readiness

Medicare, Maryland Medicaid, Virginia Medicaid, Priority Partners, Cigna, and Cash Pay requests are reviewed according to applicable payer, eligibility, medical necessity, authorization, documentation, and product-availability requirements.



Delivery Support

Delivery coordination throughout the service area when documentation, payer requirements, and product availability are confirmed.

Referral-ready support

Preferred referral method: secure fax to (301) 560-5444.

NPI: 1689491748

At-a-glance provider information for referral teams and care coordinators.



QUICK FACTS

At-a-glance provider information for referral teams and care coordinators.



Accredited Medicare DMEPOS Supplier



Medicare Accepted



Maryland Medicaid Accepted



Virginia Medicaid Accepted



Priority Partners Accepted



Cigna Accepted



Cash Pay Accepted



Serving Maryland, Washington, D.C. & Northern Virginia



Dedicated Referral Coordination



Benefits Verification Assistance



Delivery Coordination



Office: (240) 607-3076



Referral Fax: (301) 560-5444



General Email: info@ascendmedicalsolution.com



**Referral Email:
referrals@ascendmedicalsolution.com**



Website: www.ascendmedicalsolution.com

Welcome Letter

Ascend Medical Solutions appreciates the opportunity to serve as a dependable durable medical equipment and supplies resource for your patients and care teams.

We support hospitals, discharge planners, case managers, waiver coordinators, physician offices, home health agencies, assisted living communities, skilled nursing facilities, rehabilitation facilities, caregivers, and patients who need medically necessary DME coordination.

Our team focuses on clear communication, benefits verification support, documentation follow-up, and delivery coordination across our service area.

Ascend Medical Solutions currently serves Medicare, Maryland Medicaid, Virginia Medicaid, Priority Partners, Cigna, and Cash Pay patients. Coverage is subject to medical necessity, eligibility, prior authorization when required, payer guidelines, product availability, and required documentation.



ABOUT ASCEND

Company overview and referral-source value.

Company Overview

Ascend Medical Solutions is a professional DMEPOS supplier based in Waldorf, Maryland, serving patients, caregivers, and referral sources across Maryland, Washington, D.C., and Northern Virginia.

The company provides medically necessary durable medical equipment and medical supplies, including mobility, bathroom safety, support surfaces, orthotics, incontinence supplies, breast pumps, compression/support hosiery, heat/cold therapy, traction, apnea monitors, and neuromuscular electrical stimulation equipment when payer and documentation requirements are met.

Why Refer to Ascend Medical Solutions



Accredited DMEPOS Supplier

Accredited supplier operating in accordance with applicable Medicare supplier standards.



Medicare Accepted

Medicare requests are reviewed for applicable products and documentation needs.



Maryland Medicaid Accepted

Maryland Medicaid referrals are reviewed according to payer requirements.



Virginia Medicaid Accepted

Virginia Medicaid referrals are reviewed according to payer requirements.



Priority Partners Accepted

Priority Partners referrals are reviewed according to plan requirements.



Cigna Accepted

Cigna referrals are reviewed according to member eligibility, medical necessity, plan requirements, required documentation, and prior authorization when applicable.



Cash Pay Options

Cash Pay may be available when insurance is not used or coverage criteria are not met.



Responsive Referral Coordination

Referral review, benefits verification, and documentation follow-up are handled promptly.



Personalized Patient Support

Patients and caregivers receive clear communication throughout the coordination process.



Delivery Throughout Our Service Area

Delivery coordination is available throughout the service area when requirements are met.



Dedicated Referral Contacts

Referral phone, fax, and email support: (240) 607-3076, (301) 560-5444, referrals@ascendmedicalsolution.com.

Durable medical equipment and medical supplies organized for quick referral review.



PRODUCTS

Durable medical equipment and medical supplies organized for quick referral review.



Mobility

Wheelchairs, transport chairs, walkers, rollators, canes, crutches, seat lift mechanisms, manual wheelchair accessories, and wheelchair seating/cushions.



Bathroom Safety

Commodes, urinals, bedpans, shower chairs, and bathroom safety equipment.



Pressure Care

Pressure-reducing mattresses, overlays, pads, and support surfaces.



Orthotics

Off-the-shelf orthotics and traction equipment when ordered and documented.



Women's Health

Breast pumps and support hosiery / compression garments.



Medical Supplies

Incontinence supplies, neuromuscular electrical stimulators, apnea monitors, heat therapy, and cold therapy products.

Full Product Reference

- ☐ Incontinence supplies
- ☐ Wheelchairs and transport chairs
- ☐ Walkers and rollators
- ☐ Canes and crutches
- ☐ Commodes, urinals, and bedpans
- ☐ Shower chairs and bathroom safety equipment
- ☐ Pressure-reducing mattresses, overlays, and pads
- ☐ Seat lift mechanisms
- ☐ Wheelchair seating and cushions
- ☐ Off-the-shelf orthotics
- ☐ Neuromuscular electrical stimulators
- ☐ Apnea monitors
- ☐ Breast pumps
- ☐ Support hosiery / compression garments
- ☐ Heat and cold therapy products
- ☐ Traction equipment

Common HCPCS references for referral planning.



HCPCS/PRODUCT REFERENCE GUIDE

Common HCPCS references for referral planning.

This guide references common HCPCS categories. Final coding, coverage, authorization, and documentation requirements depend on payer guidelines and product selection.

Product Area	Common HCPCS	Notes
Incontinence supplies	T4521-T4544, A4554	Briefs, pull-ups, liners, underpads, and related supplies when requirements are met.
Standard manual wheelchairs	K0001-K0007	Manual mobility equipment based on documentation and payer criteria.
Walkers and rollators	E0130-E0149	Standard walkers, wheeled walkers, and accessories.
Canes and crutches	E0100-E0118	Ambulation assistance devices.
Commodes	E0163-E0168	Bedside commodes and related bathroom safety products.
Hospital beds / support surfaces	E0250-E0373	Beds, mattresses, overlays, and support surfaces.
Orthotics	L-codes	Off-the-shelf orthotic braces when medically necessary.
Breast pumps	E0602-E0604	Breast pumps and related supplies when payer requirements are met.
Heat / cold therapy	E0210-E0239	Therapy products based on payer guidelines.
Traction equipment	E0830-E0948	Home traction devices when ordered and documented.
NEMS / electrotherapy	E0745-E0770	Neuromuscular electrical stimulation and related devices.

Current accepted coverage for referral planning.



INSURANCE PARTICIPATION

Current accepted coverage for referral planning.



Currently Accepted

Medicare

Maryland Medicaid

Virginia Medicaid

Priority Partners

Cigna

Cash Pay



Coverage Review Statement

Ascend Medical Solutions currently serves Medicare, Maryland Medicaid, Virginia Medicaid, Priority Partners, Cigna, and Cash Pay patients. Coverage is subject to medical necessity, eligibility, prior authorization when required, payer guidelines, product availability, and required documentation.



Service Area

Maryland, Washington, D.C., Northern Virginia, and primary focus communities throughout Southern Maryland, Waldorf, and surrounding communities.



Office Hours

Monday-Friday: 9:00 AM-5:00 PM. After-hours phone support is available for urgent equipment coordination and other non-medical emergencies.

Accreditation & Medicare Supplier Standards

Ascend Medical Solutions is an accredited Medicare DMEPOS supplier through The Compliance Team and operates in accordance with applicable Medicare supplier standards. Accreditation effective April 23, 2025 through April 23, 2028.

Responsive coordination without promising same-day delivery.

REFERRAL PROCESS

Responsive coordination without promising same-day delivery.

1



Prompt Referral Review

Referral information is reviewed for product needs, patient demographics, insurance information, and documentation status.

2



Benefits Verification

Coverage and eligibility are reviewed according to payer requirements.

3



Insurance Coordination

Prior authorization or additional documentation requests are coordinated when applicable.

4



Delivery Scheduling

Delivery is coordinated when documentation, payer requirements, and product availability are confirmed.

5



Ongoing Communication

Referral sources receive updates when additional information or follow-up is needed.

How to submit

Preferred: secure referral fax (301) 560-5444

Questions: (240) 607-3076

Referrals: referrals@ascendmedicalsolution.com

Hospital-friendly quick reference for referral review.



REFERRAL CHECKLIST

Hospital-friendly quick reference for referral review.

Referral Checklist

- | | |
|---|--|
| ☐ Physician Order | ☐ Insurance Cards |
| ☐ Face-to-Face Documentation (when required) | ☐ ICD-10 Diagnosis |
| ☐ Clinical Notes | ☐ Delivery Address |
| ☐ Patient Demographics | ☐ Patient Contact Information |

Item-Specific Documentation May Include

- Wheelchairs: mobility limitations, home use need, patient measurements, accessories, and custom requirements.
- Pressure support surfaces: wound stage/location, turning/repositioning plan, prior support surface use, and clinical justification.
- Orthotics: affected limb/joint, diagnosis, functional need, and product type requested.
- Incontinence supplies: diagnosis, frequency/quantity, size, and patient/caregiver contact for confirmation.
- Breast pumps: expected delivery date or postpartum status, payer rules, and requested pump type.
- Apnea monitors or electrical stimulators: clinical notes and payer-required prescribing details.

Referral routing details for provider teams and care coordinators.



CONTACT INFORMATION

Referral routing details for provider teams and care coordinators.

Refer a patient today

Preferred referral method: secure fax

(301) 560-5444 **(240) 607-3076**



Office

Ascend Medical Solutions



Referral Fax

(301) 560-5444



Referral Email

referrals@ascendmedicalsolution.com



General Email

info@ascendmedicalsolution.com



Website

www.ascendmedicalsolution.com



Office Address

10 Irongate Drive, Suite F, Waldorf, MD 20602



NPI

1689491748



Accreditation

DMEPOS accredited through The Compliance Team



Service Area

Maryland, Washington, D.C., Northern Virginia



Office Hours

Monday-Friday: 9:00 AM-5:00 PM

Accreditation period

Effective: April 23, 2025 Expiration: April 23, 2028

NPI: 1689491748