



Summary of CMS Nationwide Temporary Enrollment Moratoria (DMEPOS)

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Effective: February 27, 2026

Background & Authority

On February 27, 2026, the Centers for Medicare & Medicaid Services (CMS) published a Federal Register notice announcing a nationwide temporary moratorium on the enrollment of certain Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) supplier medical supply companies in Medicare. The moratorium is effective February 27, 2026, and will remain in place for six months.

This action is authorized under section 1866(j)(7) of the Social Security Act, as added by section 6401 of the Affordable Care Act. The statute permits CMS to impose temporary enrollment moratoria on new providers or suppliers in Medicare, Medicaid, and the Children's Health Insurance Program (CHIP) if CMS determines that such action is necessary to prevent or combat fraud, waste, or abuse.

Rationale for the Moratorium

CMS determined that certain DMEPOS medical supply companies present heightened program integrity risks. The agency relied on data analytics, enforcement trends, and consultation with law enforcement partners.

CMS identified patterns of elevated revocations, payment suspensions, investigations, and improper billing among new entrants in this supplier category. Based on this analysis, CMS concluded that temporarily pausing new enrollments would reduce exposure to fraud and strengthen front-end screening.

Scope and Application

The moratorium applies nationwide and affects only new Medicare enrollment applications submitted by DMEPOS medical supply companies during the six-month period. CMS will not accept or process new enrollment applications in this category.

Existing enrolled suppliers may continue to operate and bill Medicare, subject to ongoing compliance requirements. Routine updates to enrollment information for currently enrolled suppliers are not prohibited.

Under Affordable Care Act requirements, state Medicaid and CHIP agencies must implement corresponding moratoria unless a state determines that doing so would adversely affect beneficiary access to care.

Beneficiary Access and Program Integrity

CMS evaluated beneficiary access to medically necessary supplies before imposing the moratorium and determined that adequate supplier capacity currently exists nationwide.

The moratorium reflects CMS's broader strategy of shifting toward preventive, data-driven program integrity measures. Rather than relying solely on post-payment audits, CMS is strengthening front-end enrollment safeguards to reduce improper payments before they occur.

Administrative Considerations

The notice states that CMS's decision to impose the moratorium is not subject to judicial review under the statute.

The Federal Register publication also includes required regulatory impact analysis addressing effects on small businesses, state agencies, and overall program expenditures.

Key Takeaways

- CMS has imposed a six-month nationwide moratorium on new Medicare enrollment of DMEPOS medical supply companies, effective February 27, 2026.
- Existing suppliers may continue operations and billing.
- States must implement corresponding Medicaid and CHIP moratoria unless access concerns justify an exception.
- The action is part of a broader CMS initiative to strengthen fraud prevention and program integrity using data-driven enrollment oversight.