Insurance Guidelines

CompuMed® Automated Medication Dispenser

For patients needing a CompuMed medication management system, the following forms are typically required by insurers:

Certificate of Medical Necessity (CMN) Prescription for a CompuMed written on the doctor's pad

Some third party payors require you to purchase CompuMed, then turn in a receipt for reimbursement. Others pay for CompuMed directly. We are glad to work with you in a professional manner in securing coverage for CompuMed. Please let us know how we can be of assistance or if other information is required.

Please let us know which medication management system your patient needs - the Standard CompuMed or the Enhanced Security CompuMed.

If you have questions, please call us at 1-800-722-4417 or 307-868-2555.





For those who forget.

Standard CompuMed

The Standard CompuMed is lockable and secure - for willing but forgetful patients.

Enhanced Security CompuMed

The Enhanced Security CompuMed adds a metal plate, hasp and lock to the standard CompuMed unit. Security is increased for those who tend to abuse medication.



For those who remember too well.

Certificate of Medical Necessity
CompuMed Automated Medication Dispenser
HCPC Code S5185 NAICS 334510 CAGE 5NFF3

Patient	Service Provider (Physician, Agency, et al.)
Name	Name
Birthday/ M _	F Address
Address	City
City, ST Zip	
Phone () -	Phone ⁽⁾ -
Medicaid #	NPI #
Medicare #	
Date / / prescribed	Contact Phone () -
Diagnosis Code Descrip	otion
Medications used by patient (Medication	(please include an attachment for additional medications) Dosage Frequency per day
Clinical Notes (Describe why medication	n management is necessary. Attach additional notes if needed.)
Physician certification To the hes	et of my knowledge, the above information is true, accurate
	edically indicated and necessary to the health of the patient.
Physician signature	Date Rev 07/16

Please include a prescription