



## MO HealthNet PA Criteria Proposal

Medical Procedure Class:	<b>DME RESPIRATORY ASSIST DEVICE (RAD) WITH BACK- UP RATE - E0471 (KJRR)</b>
Implementation Date:	<b>5/1/08</b>
Prepared for:	<b>MO HealthNet</b>
Prepared by:	<b>ACS-Heritage Information Systems, Inc.</b>

**New Criteria**

**Revision of Existing Criteria**

### Executive Summary

<b>Purpose:</b>	To allow a more consistent and streamlined process for authorization of RAD with back-up rate.	
<b>Why was this Issue Selected:</b>	Senate Bill 577 passed by the 94 <sup>th</sup> General Assembly directs MO HealthNet to utilize an electronic web-based system to authorize Durable Medical Equipment using best medical evidence and care and treatment guidelines, consistent with national standards to verify medical need.	
<b>Procedures subject to Pre-Certification</b>	E0471: Respiratory assist device, bi-level pressure capability with backup rate feature, used with noninvasive interface, e.g. nasal mask or facial mask	
<b>Setting &amp; Population:</b>	All MO HealthNet fee-for-service participants	
<b>Data Sources:</b>	<input checked="" type="checkbox"/> <b>Medicare LCD</b>	<input checked="" type="checkbox"/> <b>MHN Consultants</b>

### Setting & Population

- Procedure Group for review: E0471 (KJRR)
- Age range: All MO HealthNet fee-for-service participants

## Approval Criteria

- Patient has been re-evaluated no sooner than 61 days after initiation of RAD with back-up rate therapy.
- Medical record documents progress of symptoms noted during re-evaluation and patient benefits from use of the device.
- Medical record documents patient use of RAD with back-up rate an average of 4 hours per 24 hour period by time of re-evaluation.
- Provider record contains patient-signed and dated statement that patient is compliantly using device for at least 4 hours per 24 hour period and has used the device for at least 2 months.

## Denial Criteria

- Patient is being re-evaluated less than 61 days after initiation of RAD with back-up rate therapy.
- Medical record does not document progress of symptoms noted during re-evaluation, or patient does not benefit from use of the device.
- Medical record does not document patient use of RAD with back-up rate an average of 4 hours per 24 hour period by time of re-evaluation.
- Provider record does not contain patient-signed and dated statement that patient is compliantly using device for at least 4 hours per 24 hour period and has used the device for at least 2 months.

## Approval Period

**E0471 ST (KJRR):** Months 4 – 12 (12 Month Approval)