

PROVIDER BULLETIN

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COMPLEX REHABILITATION DURABLE MEDICAL EQUIPMENT (DME) BULLETIN

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COMPLEX REHABILITATION DME RATE INCREASE

The MO HealthNet Division (MHD) fee-for-service program maximum allowable rates for complex rehabilitation DME services have been increased for dates of service on and after July 1, 2015. Missouri House Bill 11, passed by the 98th General Assembly, requires the increase in rates. The new rates reflect Medicare's fee schedule effective April 1, 2010. The current MHD on-line fee schedule reflects the fee increases.

MANUALLY PRICED COMPLEX REHABILITATION DME SERVICES

Manually priced manual wheelchairs (MWC) are reimbursed at 90% of the Manufacturer's Suggested Retail Price (MSRP) for dates of service on and after July 1, 2015. Manually priced power wheelchairs (PWC) are reimbursed at 95% of the MSRP. Any manually priced accessories for both MWC and PWC are also reimbursed at these rates: 90% for MWC accessories and 95% for PWC accessories.

Gait trainers and standers are included in this payment increase, and are reimbursed at 90% of MSRP versus the previous rate of Invoice of Cost plus 20%.

Also effective for dates of service on and after July 1, 2015, procedure codes E2609 and E2617 are reimbursed at 90% of the MSRP for a MWC's or 95% of the MSRP for a PWC. E2609 indicates a "custom fabricated wheelchair seat cushion, any size." Procedure code E2617 indicates a "custom fabricated wheelchair back cushion, any size, including any type mounting hardware." The maximum allowable amount of \$1,300 per custom seat and back cushion has been eliminated.

The MSRP for all manually priced complex rehabilitation equipment must be submitted with the prior authorization request. MHD will continue to reimburse the lesser of either the provider's usual and

customary charge or the maximum allowable amount per unit of service. Providers may not bill MHD at a higher rate than they charge their private pay patients.

PRIOR AUTHORIZATION REVISIONS

MHD has identified prior authorizations (PAs) for complex rehabilitation DME items that were approved at the previous rates for dates of service on and after July 1, 2015. MHD has completed updating the PAs since the authorized amounts or units must match any corresponding claims resubmitted or adjusted for services provided.

MASS ADJUSTMENT OF CLAIMS

MHD has also identified corresponding paid claims to providers for dates of service on and after July 1, 2015. MHD will process a systematic mass adjustment to correct the reimbursement amounts to providers. Providers will see this adjustment on their September 9, 2016 remittance advice.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at <http://dss.mo.gov/mhd/> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

**Provider Communications Hotline
573-751-2896**