

## PROVIDER BULLETIN

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## DME – PRIMARY AND SECONDARY INVASIVE VENTILATORS

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### **NEW VENTILATOR HCPCS CODE – E0465**

The Centers for Medicare and Medicaid Services (CMS) issued a release on November 17, 2015, stating that primary and secondary invasive ventilator codes E0450 and E0463 would be invalid as of January 1, 2016. Products previously assigned to HCPCS codes E0450 and E0463 must now use the single HCPCS code E0465 to receive payment for primary and secondary invasive ventilator monthly rentals.

For more information about this change, please visit:  
<http://www.medicarehic.com/viewdoc.aspx?id=2653>.

Effective for dates of service on or after January 1, 2016, providers must now request prior authorizations using the new HCPCS code E0465 for primary and secondary invasive ventilator monthly rentals.

### **DISCONTINUE USE OF HCPCS CODES – E0450 and E0463**

Effective for dates of service on and after January 1, 2016, the MO HealthNet Division (MHD) is discontinuing reimbursement for HCPCS codes E0450 and E0463 on monthly rental claims for primary and secondary invasive ventilators.

### **CLAIMS ALREADY SUBMITTED AND PAID**

MHD has identified paid claims to providers for HCPCS codes E0450 and E0463 for dates of service on and after January 1, 2016. MHD has processed a systematic mass adjustment to correct the identified claims reimbursed at the previous rates. The adjusted reimbursement will reflect the rate associated with the new HCPCS code of E0465.

NOTE: The mass adjustment will change the amounts paid for claims previously billed with HCPCS code E0450. The provider's remittance advice (RA) will show an increase in payment and correct the HCPCS code to E0465.

HCPCS code E0465 will be reimbursed at the same rate as HCPCS code E0463. Providers who were previously paid for E0463 will not see a change in rate. The RA will only reflect that an adjustment was done to correct the HCPCS code to E0465.

Providers should expect to see the mass adjustment reflected on their August 18, 2016 RA.

**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**