

## PROVIDER BULLETIN

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# PHYSICIAN AND DURABLE MEDICAL EQUIPMENT

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### **PRESSURE SUPPORT VENTILATORS**

Effective for dates of service on or after March 3, 2009, MO HealthNet will cover pressure support ventilators (procedure code E0463, pressure support ventilator with volume control mode, may include pressure control mode, used with invasive interface, e.g. tracheostomy tube). Procedure code E0463 may be covered as a continuous rental of the primary ventilator and as a back-up ventilator if the coverage criteria indicated below are met.

### **COVERAGE CRITERIA FOR VENTILATOR RENTAL**

A volume ventilator (E0450RR) is covered when the following criteria are met:

1. The ventilator is required for treatment of a neuromuscular disease, thoracic restrictive disease, or chronic respiratory failure; AND
2. The patient has an artificial airway.

A pressure support ventilator (E0463RR) is covered for participants under the age of 21 when the following criteria are met:

1. All the criteria for a volume ventilator are met; AND

2. There is a written prescription for the pressure support ventilator from a pulmonologist or related pediatric subspecialist actively engaged in the care and treatment of the patient.

A pressure support ventilator (E0463RR) is covered for participants age 21 and over when the following criteria are met:

1. All the criteria for a volume ventilator are met; AND
2. There is a written prescription for the pressure support ventilator from a pulmonologist or related subspecialist actively engaged in the care and treatment of the patient; AND
3. One of the following:
  - a. The patient's medical record contains documentation that the patient has tried and failed the volume ventilator; OR
  - b. Prior to age 21, the patient received pre-certification by MO HealthNet for a pressure support ventilator.

#### **COVERAGE CRITERIA FOR BACK-UP VENTILATOR RENTAL**

A back-up volume ventilator (E0450TWRR) may be covered when the following criteria are met:

1. The criteria for approval of a volume ventilator are met; AND
2. The patient requires ventilation 24 hours per day; AND
3. Justification of the medical necessity is provided via submission of a [CyberAccess<sup>SM</sup>](#) help ticket or a phone call to the help desk at 800-392-8030

A back-up pressure support ventilator (E0463TWRR) may be covered when the following criteria are met:

1. The criteria for approval of a pressure support ventilator are met; AND
2. The patient requires ventilation 24 hours per day; AND
3. Justification of the medical necessity is provided via submission of a [CyberAccess<sup>SM</sup>](#) help ticket or a phone call to the help desk at 800-392-8030

#### **MO HEALTHNET MAXIMUM ALLOWABLE**

The MO HealthNet maximum allowable reimbursement for monthly rental of a pressure support ventilator (procedure code E0463RR) is \$1,406.38. The maximum allowable reimbursement for monthly rental of a back-up pressure support ventilator (E0463TWRR) is \$703.19.

## **PRE-CERTIFICATION OF VENTILATORS**

Effective for dates of service on or after March 3, 2009 the following ventilator procedure codes will require pre-certification:

E0450RR: Volume control ventilator, without pressure support mode, may include pressure control mode, used with invasive interface (e.g., tracheostomy tube)

E0450TWRR: Volume control ventilator (back-up), without pressure support mode, may include pressure control mode, used with invasive interface (e.g., tracheostomy tube)

E0463RR: Pressure support ventilator with volume control mode, may include pressure control mode, used with invasive interface (e.g. tracheostomy tube)

E0463TWRR: Pressure support ventilator (back-up) with volume control mode, may include pressure control mode, used with invasive interface (e.g. tracheostomy tube);

In order to be approved, requests must meet the medical criteria established by the MO HealthNet Division (MHD). Medical criteria documents may be found at [www.dss.mo.gov/mhd](http://www.dss.mo.gov/mhd).

## **APPROVAL PERIOD FOR VENTILATORS AND BACK-UP VENTILATORS**

Initial pre-certification approvals for ventilators and back-up ventilators will be authorized for the period of time specified by the requesting physician up to 12 months. Subsequent pre-certifications for ventilators and back-up ventilators will be given a lifetime authorization.

## **VOLUME VENTILATORS CURRENTLY BEING RENTED**

MO HealthNet currently requires an approved Certificate of Medical Necessity be on file for reimbursement of a volume ventilator and an approved Prior Authorization form be on file for a back-up volume ventilator. Medical necessity requests and prior authorization requests that are submitted and approved prior to March 3, 2009 will be converted to a pre-certification effective March 3, 2009. The authorization period of the pre-certification will be for a lifetime if MO HealthNet's records indicate the service has been approved for at least twelve continuous months.

## **INITIATING PRE-CERTIFICATION REQUESTS FOR DME**

Pre-certification of DME is a two-step process. Requests for pre-certification must be initiated by an authorized DME prescriber who writes prescriptions for items covered under the DME Program. Authorized DME prescribers include physicians, podiatrists, and nurse practitioners who have a collaborative practice agreement with a physician that allows for prescription of such items. The enrolled DME provider will access the pre-certification initiated by the prescriber to complete the second step of the pre-certification process. All requests must be approved by the MHD. Providers are encouraged to sign up for the MO HealthNet Web tool –

[CyberAccess<sup>SM</sup>](#) - which automates the pre-certification process. To become a CyberAccess<sup>SM</sup> user, contact the ACS-Heritage help desk toll free at 1-888-581-9797 or 573-632-9797 or send an e-mail to [MOHealthNetCyberaccess@heritage-info.com](mailto:MOHealthNetCyberaccess@heritage-info.com). The CyberAccess<sup>SM</sup> tool allows each pre-certification to automatically reference the individual participant's claim history, including ICD-9 diagnosis codes and CPT procedure codes. Requests for pre-certification will also be taken by the MO HealthNet call center at 800-392-8030. In order to be approved, requests for pre-certification must meet medical criteria established by the MHD. Prior to implementation, [medical criteria](#) are published in [provider bulletins](#) and posted on the [MHD Web site](#). If a pre-certification request submitted through CyberAccess<sup>SM</sup> is denied, providers may click on the box to have a MO HealthNet call center representative contact them. The call center is available Monday through Friday, from 8:00 am to 5:00 pm, excluding state holidays.

PLEASE NOTE: An approved pre-certification request does not guarantee payment. The provider must verify participant eligibility on the date of service using the Interactive Voice Response (IVR) System at (573) 635-8908 or by logging onto the MO HealthNet Internet Web portal at [www.emomed.com](http://www.emomed.com).

**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.missouri.gov/mhd/global/pages/mednewssubscribe.htm> 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 red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

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