

## MO HealthNet PA Criteria

Medical Procedure Class:	<b>DME RESPIRATORY ASSIST DEVICE (RAD) WITHOUT BACK-UP RATE - E0470 (KJRR)</b>
Implementation Date:	<b>May 1, 2008</b>
Revised date:	<b>August 1, 2018</b>
Prepared for:	<b>MO HealthNet</b>
Prepared by:	<b>Conduent Business Services, LLC</b>

**New Criteria**

**Revision of Existing Criteria**

### Executive Summary

<b>Purpose:</b>	To allow a more consistent and streamlined process for authorization of RAD without 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>	E0470: Respiratory assist device, bi-level pressure capability without 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: E0470 (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 without 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 without back-up rate an average of 4 hours per 24 hour period by time of re-evaluation.
- Provider record contains signed and dated statement completed by the treating physician no sooner than 61 days after initiating use of device declaring patient is compliantly using device an average of 4 hours per 24 hour period and the patient benefits from its use.
- 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 without 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 without back-up rate an average of 4 hours per 24 hour period by time of re-evaluation.
- Provider record does not contain signed and dated statement completed by the treating physician no sooner than 61 days after initiating use of device declaring patient is compliantly using device an average of 4 hours per 24 hour period and the patient benefits from its use.
- 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

**E0470 (KJRR):** Months 4 – 22 (22 Month Approval)