Executive Summary

Purpose: To allow a more consistent and streamlined process for authorization of ventilators.

Why was this Issue Selected: Senate Bill 577 passed by the 94th 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.

Procedures subject to Pre-Certification
- E0450: Volume control ventilator, without pressure support mode, may include pressure control mode, used with invasive interface (e.g., tracheostomy tube)
- E0463: Pressure support ventilator with volume control mode, may include pressure control mode, used with invasive interface (e.g. tracheostomy tube)

Setting & Population: All MO HealthNet fee-for-service participants

Data Sources: 
- Medicare LCD
- MHN Policy

Setting & Population

All MO HealthNet fee-for-service participants
Approval Criteria

- **E0450RR - Volume ventilator is covered when the following criteria are met:**

  Requirements 1 and 2 must be 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.

- **E0463RR - Pressure support ventilator is covered for participants under the age of 21 when the following criteria are met:**

  Requirements 1 and 2 must be 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.

- **E0463RR - Pressure support ventilator is covered for participants age 21 and over when the following criteria are met:**

  Requirements 1-3 must be 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.

Approval Period

Rental – up to 12 months for initial pre-cert; lifetime for subsequent pre-certs
**The following questions may be encountered as part of the approval and denial criteria. Depending on the patient’s history and the way previous questions may be answered, not every question may be asked for every patient.**

- Does patient have a diagnosis of neuromuscular disease, thoracic restrictive disease, or chronic respiratory failure?

- Does the patient have an artificial airway?

- Can the patient’s ventilation needs be met with a volume ventilator?

- Does the patient require ventilation 24 hours per day?

- Is there a written prescription for a pressure support ventilator from a pulmonologist or related subspecialist actively engaged in the care and treatment of the patient?

- Does the pulmonologist or related subspecialists’ documentation indicate the patient requires ventilation 24 hours per day?

- Prior to age 21, did the patient receive a pre-certification through MO HealthNet for a pressure support ventilator?

- Does the patient’s medical record document that the patient has tried and failed the volume ventilator?

- Does the pulmonologists documentation indicate the patient requires ventilation 24 hours per day?

- Does the pulmonologists or related subspecialists documentation indicate the patient requires ventilation 24 hours per day?

- Does the provider record document a written physician order for a pressure support ventilator?

- Does the provider record document a written physician order for a volume ventilator?