

PROVIDER BULLETIN

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April 14, 2021

E0466RR – Home Non-Invasive Ventilator

Applies to: Providers who administer home non-invasive ventilator (NIV)

Effective date: May 1, 2021

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- **COVERAGE OF PROCEDURE CODE E0466RR, HOME NON-INVASIVE VENTILATOR (NIV), FOR ALL AGE PARTICIPANTS.**
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COVERAGE OF PROCEDURE CODE E0466RR, HOME NON-INVASIVE VENTILATOR (NIV), FOR ALL AGE PARTICIPANTS.

MO HealthNet will begin coverage of procedure code E0466RR, home non- invasive ventilator (NIV), for all age participants.

Participants must meet the following conditions:

- Neuromuscular disease or thoracic restrictive diseases or chronic respiratory failure consequent to chronic obstructive pulmonary disease or bronchopulmonary dysplasia (BPD).
- ABG's PaCO₂ >45 or PFT with FEV₁ < 50%
- Medical records must rule out Bi-Level Pap (Ex: Patient requires a volume targeted mode. Patient requires AVAPS-AE, IVAPS, etc. to achieve adequate ventilation.)

The choice of an appropriate treatment plan, including the determination to use a ventilator vs. a bi-level PAP device, is made based upon the specifics of each individual beneficiary's medical condition. There must be sufficient detailed information in the medical record to justify the treatment selected. Claims for ventilators used to provide CPAP or bi-level CPAP therapy will be denied as not reasonable and necessary.

Prior Authorization (PA) with supporting documentation of medical necessity is required. Reimbursement is \$1001.46 per month.

Coverage is for all age participants. Participants that have a NIV approved through MHD Exceptions, have 60 days from the date of this bulletin to contact their Durable Medical Equipment (DME) provider for a PA for approval through the DME program. Procedure code E0466RRUB will be closed effective July 31, 2021.

APPLICABILITY

Managed Care enrolled providers should contact their Managed Care Organization for questions regarding Durable Medical Equipment billing and reimbursement.

Provider Bulletins are available on the MO HealthNet Division (MHD) website 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 website 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.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- 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 MO HealthNet ID card.

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