

Connecticut Medical Assistance Program Policy Transmittal 2019-22

Provider Bulletin 2019-64 October 2019

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Effective Date: November 1, 2019 Contact: Ginny Mahoney @ 860-424-5145

TO: Medical Equipment, Devices and Supplies (MEDS) Providers

RE: Increase in Actual Acquisition Cost Percentage for Overhead Patient Lifts Codes (E0639 and E0640)

Effective for dates of service November 1, 2019 and forward, the Department of Social Services (DSS) has revised the pricing methodology for the following two Healthcare Common Procedure Coding System (HCPCS) codes that are on the Connecticut Medical Assistance Program (CMAP) MEDS Durable Medical Equipment (DME) fee schedule:

Codes	Code Description	
E0639	Patient lift, moveable from room	
	to room with disassembly and	
	reassembly, includes all	
	components/accessories	
E0640	Patient lift, fixed system, includes	
	all components/accessories	

Pricing Methodology

DSS is updating the pricing methodology as detailed below, including increasing specified components from actual acquisition cost (AAC) plus 15% to AAC plus 40% in order to reflect the complexity related to providing overhead patient lifts. The new pricing methodology is being modified to the following:

Category	Range in	Methodology
	Costs	
Material	Varies based	AAC plus
cost	on tracking,	40%
	hardware	
	and lift box.	

Category	Range in Costs	Methodology
Evaluation Time	Between \$150 - \$250 based on type of overhead lift	Actual cost. No mark up
Labor to install overhead lift	Varies based on type of overhead lift	Actual cost. No mark up
1 Sling	\$175 - \$300	AAC plus 40%
Freight	Actual cost	Actual Cost. No mark up

Mileage reimbursement for travel costs to members' homes will not be reimbursed separately and are included in the overall reimbursement for the overhead patient lift.

<u>Prior</u> Authorization (PA) Submission <u>Process</u>

There are no changes to the PA submission process. Providers may continue to fax the completed Outpatient PA Request Form or submit the request via the medical PA Web portal.

The Outpatient PA Request Form is available on the HUSKY Health Web site at <u>www.ct.gov/husky</u>. To access the form, click on "For Providers" followed by "Prior Authorization Forms and Manuals" under the "Prior Authorization" menu item. The medical PA Web portal is available via a link on the HUSKY Health Web site at <u>www.ct.gov/husky</u>. To access the link, click on "For Providers" followed by "Medical Prior Authorizations" under the "Prior Authorization" menu item. Once on the "Prior Authorization" landing page, click the "Medical Authorization Portal" button located in the center of the screen.

For PA requests in which the AAC with applicable discounts is not submitted, PA will be placed in a pending status until such information is received. PA requests that pend for twenty (20) business days without receipt of all requested documentation will be denied.

<u>Repairs</u>

Repairs for overhead patient lifts must be billed at manufacturer's suggested retail pricing (MSRP) minus 15%. PA is required for any repairs over \$646.50.

Accessing the Fee Schedules

The updated MEDS fee schedule can be accessed and downloaded by accessing the CMAP Web site: <u>www.ctdssmap.com</u>. From this Web page, go to "Provider", then to "Provider Fee Schedule Download". Click on the "I accept" button and scroll down to the "MEDS – Durable Medical Equipment" fee schedule. To access the CSV file, press the control key while clicking the CSV link, then select "Open".

Posting Instructions: Policy transmittals can be downloaded from the Connecticut Medical Assistance Program Web site at www.ctdssmap.com. **Distribution:** This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by DXC Technology.

<u>Responsible Units</u>: DSS, Division of Health Services, Medical Policy; Ginny Mahoney, Policy Consultant at (860) 424-5145

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