

## **Nebraska Department of Health and Human Services** No. 18-01 **Health Plan Advisory**

DATE: February 26, 2018

TO: Nebraska Heritage Health Plans

Thomas 'Rocky' Thompson, Interim Director FROM:

Division of Medicaid & Long-Term Care

BY: Tara Neeman, Program Specialist

RE: **DME Prior Authorization Requirements** 

This health plan advisory is being issued to rescind and replace HPA 17-10 and provide guidance to the Heritage Health Plans regarding prior authorization requirements for durable medical equipment, prosthetic, orthotics and medical Supplies (DMEPOS). This guidance is effective on April 1, 2018. The following changes were made effective September 1, 2017. Heritage Health plans are responsible for making the list of DME codes requiring prior authorization available on their website.

As part of the 2017 Administrative Simplification Committee guidance, the Heritage Health plans must implement policies, procedures, and system changes to show prior authorization is only required for codes greater than \$750 or as otherwise indicated below.

- Purchase items: Prior authorization is required for items greater than \$750.
- Rental items: Prior authorization is required when the cost for the entire rental period requested is greater than \$750 (e.g. \$200/month rental charge for a four month rental period request).
- Rate not established (RNE): Prior authorization is required for items greater than \$750.
- The following codes which generally pay at a rate less than \$750 require prior authorization:
  - E0265 RR, E0266 RR, E0300 RR, E0303 RR, E0470 RR, E0471 RR, E0667 NU, E0668 NU, E0745 RR, E0747 RR, E0760 RR, E1008 RR, E1161 RR, E1230 RR, E1232 RR, E1233 RR, E1234 RR, E1235 RR, E1236 RR, E1237 RR, E1238 RR, E2510 RR,

K0005 RR, K0007 RR, K0011 RR, K0014 RR, K0801 RR, K0802 RR, K0806 RR, K0807 RR, K0808 RR, K0821 K0822 RR, K0823 RR, K0824 RR, K0825 RR, K0826 RR, K0827 RR, K0829 RR, K0837 RR, K0838 RR, K0839 RR, K0841 RR, K0842 RR K0843 RR, K0848 RR, K0849 RR, K0850 RR, K0851 RR, K0856 RR, K0857 RR, K0859 RR, K0861 RR

Heritage Health Plans will be responsible for informing their network providers of prior authorization requirements for these codes and making this information available on their website.

This guidance does not prevent the health plan from post payment review activities outlined in the Heritage Health contract.

If you have any questions about this advisory, please contact MLTC staff at <a href="mailto:DHHS.DME@nebraska.gov">DHHS.DME@nebraska.gov</a>. Health plans should also copy their contract manager.