

T

R

E

L

A

To: All DME Providers

RE: DME Policy

CPAP Device:

- The standard required documentation of reduction on CPAP in patients sleep events of at least 50% is being replaced with four hours per night, 50% of all nights.
- A physician's evaluation is required at least once every six months.
- **Beginning October 1, 2007**, all providers will be required to submit smart card readings as documentation of patient compliance at recertification.
- All providers will be given a six-month grace period to obtain smart card readings. Policy change will be retroactive to October 1, 2006 (CPAP initial change date)
- Documentation of patient compliance is required and must be verified with smart card downloads. In order for the provider to obtain results, the smart card reading is required at the six-month recertification.

Reimbursement for new K codes for power wheelchairs/accessories, custom manual wheelchairs/accessories:

- **Effective May 1, 2007**, reimbursement for new K codes assigned to power wheelchairs will be implemented. E1220 will remain on the fee schedule.
- Providers are required to use an appropriate code for power/custom manual wheelchairs and accessories
- In the event there is not an appropriate code, the provider may use E1220.
- As a reminder, all prior authorization requests submitted using procedure code E1220 will be reviewed to ensure there is not another code available.

Dispensing diabetic supplies (strips & lancets):

- Providers dispensing diabetic supplies must have the recipient's prescription on file from the primary care physician.
- A valid prescription will contain the frequency for daily blood sugar testing.
- Providers must ensure that diabetic supplies are dispensed based on the daily frequency of blood sugar testing indicated on the recipient's prescription.
- For example if blood sugar testing is prescribed twice a day, (2 X 30 days) = 60 strips) two boxes of strips must be dispensed for the first month. For subsequent months, the provider should only dispense one box (50ct) or additional boxes as needed. The recipient should have forty strips remaining from the previous month. Lancets (100ct) should also be dispensed based on the daily frequency of blood sugar testing.
- It is the provider's responsibility to ensure that the recipient does not have an excessive supply of strips/lancets.
- If it is determined through Provider Audits that Medicaid has reimbursed the provider for excessive amounts of strips/lancets, the amount paid for the excessive supply will be recouped.

Questions related to the DME program shall be directed to Ida Gray at (334)-353-4753.

More information regarding the Alabama Medicaid Agency is available at the following website: www.medicaid.alabama.gov

May 15, 2007