Quick Points



October 21, 2011

Respiratory assist devices for Minnesota Health Care Programs (MHCP) members

Blue Plus follows the Department of Human Services (DHS) process as outlined in the MHCP Manual for respiratory assist devices.

The provider may dispense a Continuous Positive Airway Pressure (CPAP) device for the first 3 months' rental based on a physician's order that includes a diagnosis of obstructive sleep apnea. During the 6th to 12th week, the supplier must verify that the recipient is complying with the ordered therapy.

Blue Plus will pay for the rental of a Bi-PAP device without backup rate for the first 3 months' rental based on a physician's order that includes a diagnosis of obstructive sleep apnea when there has been a failed trial of CPAP. During the 6th to 12th week, the supplier must verify that the recipient is complying with the ordered therapy.

Recipient compliance

To accomplish an accurate and valid verification of compliance it must be clear that the recipient is using the equipment. Several methods may be used to verify compliance. Possible methods that could be used:

• Call the treating provider to verify the recipient is using the equipment and symptoms have stabilized or improved.

• If the CPAP or Bi-PAP machine has a time meter, make a visit to the recipient's home to read the meter, or call the recipient to have the recipient read and report the meter count.

Keep documentation of the compliance verification in the recipients file. Recommended documentation:

- Date of verification
- Method of verification
- Reading of the time meter from the machine
- Speaking with the treating provider
- Name of the treating provider
- Name of the person within your organization who performed the verification

If the recipient is not using the equipment, the rental should end and the equipment should be taken back.

Blue Plus will pay for the rental of a Bi-PAP device with backup rate for recipient's with obstructive sleep apnea and coexisting breathing disorders. Both diagnoses must be on the claim. For recipients without obstructive sleep apnea, refer to Respiratory Assist Device policy. Payment is limited to 10 months' rental.

Billing

Effective for dates of service on or after July 1, 2010, Positive Airway Pressure devices are capped rental only.

• Bill the first 3 months using modifier RR

• When billing for rental after the first 3 months, use modifier RR and modifier KX if documentation in the file supports that the supplier has verified recipient compliance with treatment. Do not use modifier KX if the supplier has not verified compliance, or if the supplier has information that the recipient is not compliant with treatment.

• Blue Plus will deny claims for rental past the first 3 months, unless the RR and KX modifiers are present to indicate recipient compliance with treatment.

DHS website reference

http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelecti onMethod=LatestReleased&dDocName=dhs16_149952

Questions?

If you have questions, please contact provider services at (651) 662-5200 or toll free at 1-800-262-0820.