

**PA Health & Wellness EDME/DME FAQ Document**

Line of Business: Community Health Choices (CHC)

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**Category: Exceptional DME**

**Topic: EDME Evaluation/Assessment**

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**Question: As part of the process, does the DME provider perform evaluations for EDME?**

**Answer:** Once the Participant need is identified:

- The Service Coordinator will update the service plan and interRAI.
- The Participant will be evaluated by a team led by DME-CG, which will include PT/OT/ATP/SLP certified representative from DME-CG.
  - An assessor arranges a mutually convenient time for the Participant and his/her person-centered planning team (PCPT) to evaluate the Participant and the request.
  - Independent Assessments are performed by a Pennsylvania licensed therapist, which may include a certified ATP/SLP when appropriate.
  - The **PCPT members present for the assessment** can include, but are not limited to, the Nursing Facility Care Team, the Service Coordinator, the DME provider, the DME provider’s certified ATP, and any individuals that the Participant chooses to have present.
- PHW Program Coordination ensures the authorization is built to include all needs identified through the assessment.
- The selected EDME provider will continue assessment/evaluation needed to configure the EDME item to meet Participant’s needs.

**Question: If the DME provider’s ATP has a different finding than the need that was identified through the assessment process, how is that addressed?**

**Answer:** If the DME provider believes that alternate or additional items are medically necessary, the DME provider will contact the DME-CG and the Service Coordinator (SC) to find a solution collaboratively. The Independent Assessor (IA) will notify PHW of the outcome and resulting recommendation; based on the updated recommendation, PHW will make a determination and

any resulting adjustments will be made to the approval/authorization. In the event that DME-CG and the DME vendor are not able to come to an agreement, both recommendations will be reviewed by PHW Medical Director(s) for determination.

**Question: When a customer needs a replacement power chair and goes to the clinic for an evaluation, who needs to notify the SC since it cannot be initiated by the DME vendor?**

**Answer:** The Participant, the Nursing Facility, the DME provider, or a member of the Participant's PCPT can reach out to initiate contact with the SC.

## **Topic: Provider Selection**

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**Question: If the Participant and therapist request a specific equipment provider during the DME-CG assessment, will this be relayed to PHW?**

**Answer:** If the Participant requests a specific equipment provider during the assessment process, this should be relayed to PHW by the Service Coordinator.

**Question: Where can the Participant locate EDME providers?**

**Answer:** The Participant can locate EDME providers in the directory or can call us at 844-626-6813 for assistance with locating a provider. The Service Coordinator is also able to assist.

## **Topic: EDME Authorization**

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**Question: Does EDME require Prior Authorization?**

**Answer:** Prior Authorization is required for EDME. The EDME provider will be notified of the item/need approved through the EDME assessment process. At that time, EDME provider will develop/submit a quote to PHW that includes item and accessories. When selected, authorization will be built/issued.

**Question: If an existing prior authorization has been approved, will it be valid?**

**Answer:** All authorizations in place will be honored. As of 7/9/2020, the EDME process will need to be followed in order to obtain prior authorization.

**Question: What is the timeframe for authorization?**

**Answer:** From time PHW has request and all supporting documentation to make a determination, within 2 business days.

## **Topic: EDME Definition**

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**Question: What is the \$5,000 threshold based on?**

**Answer:** Per the PA bulletin, the \$5,000 is based on acquisition cost of the item(s). PHW uses the currently published MA fee schedule rate at the baseline for acquisition cost. For more information, please reference [33 Pa.B. 5256](#).

## Topic: Exceptions to EDME Process

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**Question: Are there exceptions to the PHW EDME process? If so, how is authorization initiated?**

**Answer:** Yes. As indicated in the training, Ventilators and Air Fluidized Beds are not included in the PHW EDME process and do not require SC/DME-CG assessment. For EDME items that do not follow EDME process, prior authorization can be submitted by the DME provider through the PHW [Provider Secure Web Portal](#), through [submitting a prior authorization form](#). If any questions, call PHW at 844-626-6813, select option for prior authorization.

## Topic: DME-CG

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**Question: What types of licensed and professionally certified professionals does DME-CG employ and/or use during assessment?**

**Answer:** Currently, DME-CG has a Pennsylvania-based team of 28 PT/OT/ATP/SLP who perform assessments state-wide. As a member of the PCPT, based on Participant choice, the DME provider ATP is invited to join the assessment. The **PCPT members present for the assessment** can include, but are not limited to, the Nursing Facility Care Team, the Service Coordinator, the DME provider, the DME provider's certified ATP, and any individuals that the Participant chooses to have present.

**Question: What are the timeframes for DME-CG to do an assessment?**

**Answer:** Generally under ideal circumstance, assessment is completed by DME-CG and provided to PHW within 3 business days. If scheduling or other conflicts exist, this timeframe may be impacted to ensure the Participant need is met.

**Question: Is the DME-CG group involved in assessing for all Exceptional DME?**

**Answer:** No; the two exceptions to the independent assessment done by DME-CG are 1) ventilators and 2) air fluidized beds.

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## Category: Standard DME

### Topic: Standard DME Authorization, Coverage and Units

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**Question: To request authorization for standard DME, can that request be made by the DME provider or does it need to go through SC?**

**Answer:** For all DME, PHW prefers coordination through the SC so PHW is able to determine if there is an underlying change in condition or any other Participant need. The DME provider is able to make the request for certain items as well. In some cases, PHW will engage DME-CG to assess the Participant need. For further guidance, please check the [Pre-Auth Check tool](#).

**Question: For wipes, A4335 is on the MA fee schedule with 16 units maximum. There is no specification or description of how units are calculated. Can you please assist to understand what one package of 100 wipes would be calculated?**

**Answer:** Units are a breakdown per wipe. If there are 30 wipes in a pack, there are 30 units in a pack. In this example, 100 wipes will be calculated as 100 units.

**Question: Does PHW cover/authorize ramps allowing for outside use of DME (not in the home)?**

**Answer:** Yes, for egress and ingress

## **Topic: Repair vs. Replace**

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**Question: For DME repairs, does PHW have a threshold they use to determine whether repair or replace?**

**Answer:** In addition to the timeframes below, the item will be reviewed on a case by case basis to determine if repair or replace will be more cost-effective, while providing needed quality care to the Participant.

- If the DME/EDME item is less than six-months old and has failed under normal usage, the item should be replaced under warranty.
- If the DME/EDME item is more than six-months old but less than three-years old and has failed under normal usage, PHW will work with the provider for repair or prorated replacement.
- If the DME/EDME item is three-years old or older, meets the participant's current needs and demonstrates the potential to fail or has failed, it will be replaced.

**Question: Are pictures required to request repair/replace of an item?**

**Answer:** PHW may request documentation, including pictures, in order to make a determination. Photographs will be required for all repair-related requests.

**Question: How are repairs handled if the fault of the Participant?**

**Answer:** When damage to DME is attributable to participant misuse, PHW will replace the equipment and counsel the participant on misuse of DME and use restrictions. Ongoing repairs due to participant misuse will be considered on a case-by-case basis.

## **Topics: Misc. DME Codes**

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**Question: Criteria for use of Misc. DME Codes**

**Answer:** Misc. DME codes should be used for: 1) Continuity of Care (COC), 2) Managed Care Organization (MCO) transfers, and 3) Exceptional DME parts not on MA fee schedule

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## **Category: Other Topics**

### **Topic: Contacting the Service Coordinator**

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**Question: How would a provider access the Service Coordinator?**

**Answer:** The provider can call the PHW mainline at 844-626-6813 number to speak with the Program Coordination team. This would be communicated to the assigned Service Coordinator to return the call.

**Topic: Coordination of Benefits**

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**Question: Coordination of Benefits: If an item is not covered by Medicare, is authorization needed?**

**Answer:** If an item/service is on the MA fee schedule and Medicare does not cover, then PHW would pay as primary. Depending on the item/service, it may require prior authorization. If the item/service is not on fee schedule, it would need to go through as a program exception. Our Prior Auth checker can be located here: [www.pahealthwellness.com](http://www.pahealthwellness.com)

**Topic: EFT/ERA**

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**Question: How do you sign up for EFT/ERA for PA Health and Wellness?**

**Answer:** PHW offers EFT/ERA through PaySpan. The link to the website which will direct you is <https://www.pahealthwellness.com/providers/resources/electronic-transactions/payspan.html>