



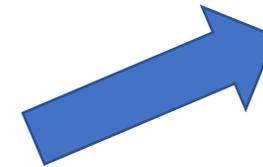
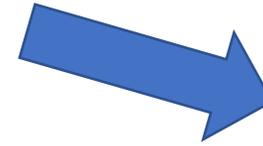
pa health
& wellness™

Exceptional DME / DME Provider Training

Transforming the Health of Our Community One Person at a Time

Before we get started...

- All participant lines are muted for this webinar
- Please enter all questions into the chat feature
- Questions will be answered at the end of each section, and after the presentation in a Q&A format or with a follow-up email
- Following this webinar, you will be sent a link to complete a survey – feedback is appreciated!
- A copy of the slides from today's presentation is attached as a "Handout" in your GoTo Webinar Toolbar



A screenshot of the GoTo Webinar toolbar. The 'Questions' menu item is circled in red. Below it, there is a checkbox for 'Show Answered Questions' and a table with columns 'Question' and 'Asker'. The 'Handouts: 1 of 5' menu item is also circled in red. Below it, there is a link for 'PHW New Provider Orientation Decem...'. At the bottom, there is a 'Chat' section with the title 'General New Provider Orientation - 1:00 pm' and the GoToWebinar logo.

- Introduction
- Program
- Exceptional DME Process
- DME
- CPAP
- Eligibility
- Prior Authorization
- Key Takeaways
- Questions?
- Key Contacts

Agenda





Today's Primary Goals

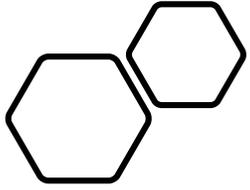
To educate our DME provider partners on PHW process

To align to provide excellent service to participants

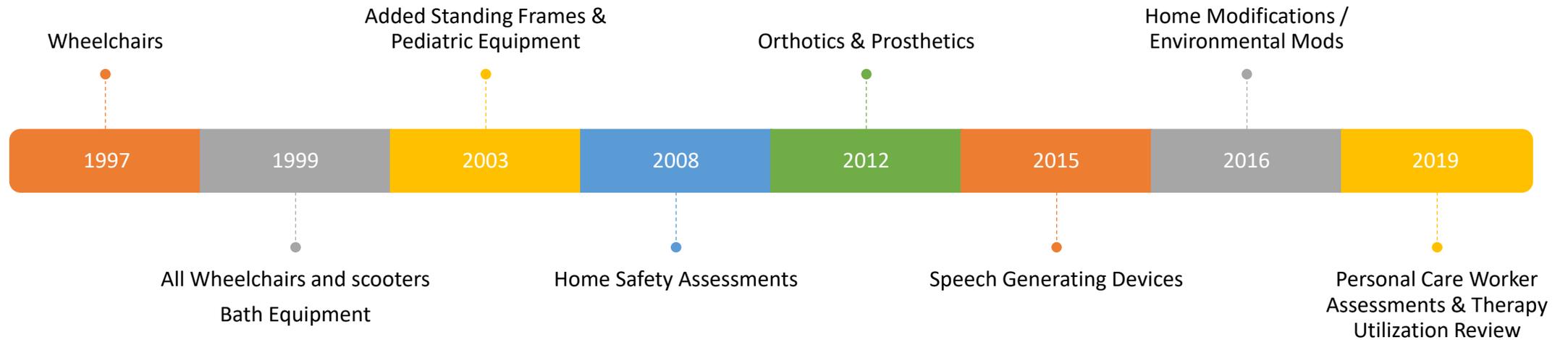


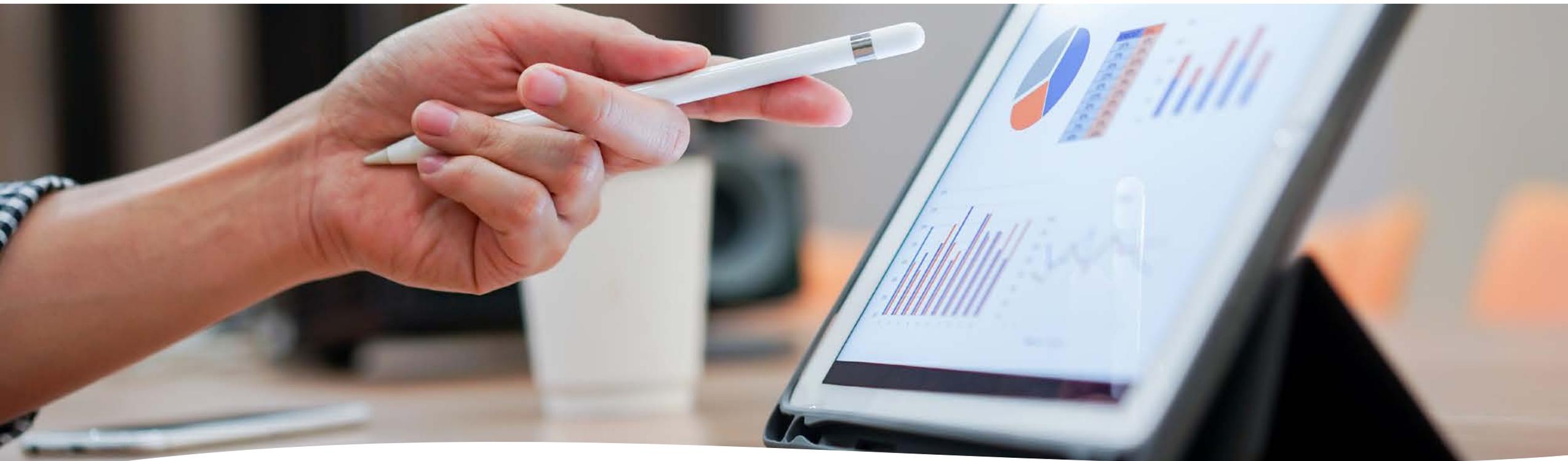
DME Consulting Group

- PT Owned and Operated
- 300+ PT's/OT's
- All clinicians receive specialized training
- All Assessments have 2-clinicians involved



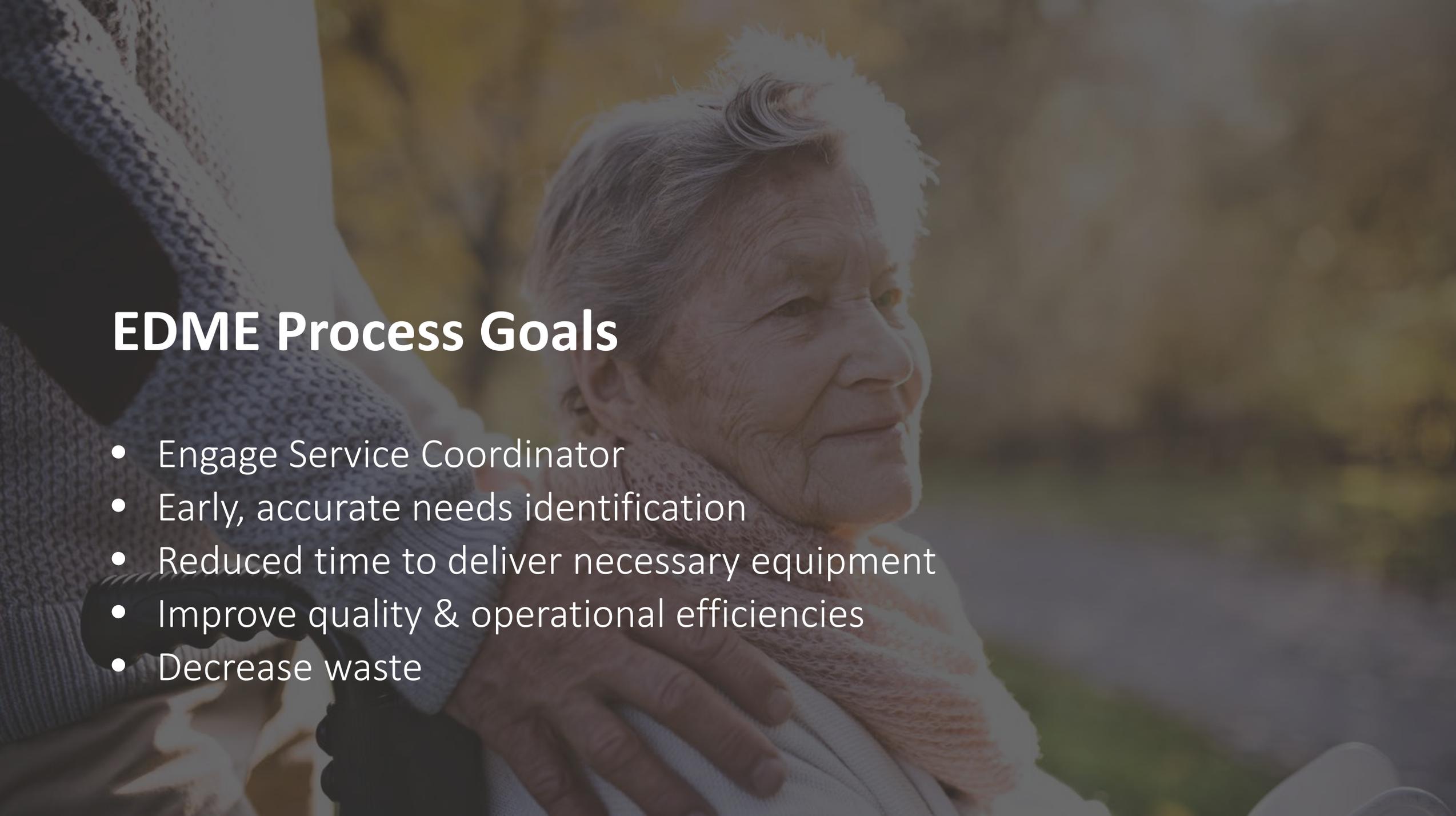
History of DME-CG





DME-CG Outcomes

- 75-80% result in provision
- 4-5% modification up
- 8-12% modification down
- 15-20% additional identification of critical information



EDME Process Goals

- Engage Service Coordinator
- Early, accurate needs identification
- Reduced time to deliver necessary equipment
- Improve quality & operational efficiencies
- Decrease waste

Process Reconfiguration

Action	Result
MD receives additional recent, relevant data	Improved Completeness & Accuracy of RX's
Early Detection	Risk Mitigation – Appropriate Cost Containment
Level Set Expectations	Reduced Conflict (Patient, MD, Equip Provider, & Plan)
Process Reconfiguration	Improve Quality Improve Efficiency Improve Delivery Times

Exceptional DME

Definition, Examples & PHW
Process





What is Exceptional DME*

Acquisition Cost => \$5,000.00 and

- Either “Specially Adapted DME”
 - Uniquely constructed or substantially adapted
 - Modified in accordance with the written orders of a physician for the particular use of one (1) resident, making its contemporaneous use by another resident unsuitable.
- Other DME that is designated as “exceptional DME”

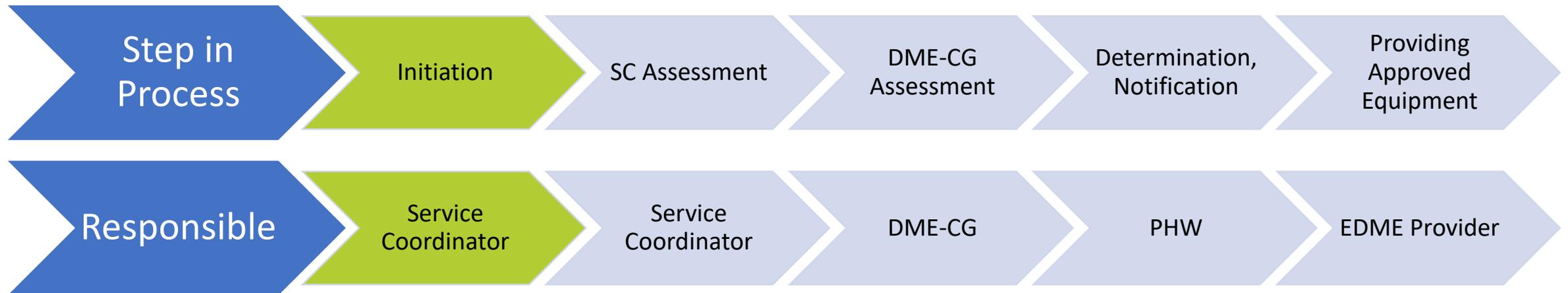
* Exceptional durable medical equipment as defined in *Pennsylvania Bulletin* 49 Pa.B 3542 (July 6, 2019)

Exceptional DME Examples

- Powered Mobility Devices / Wheelchairs
- Specifically Adapted Manual Wheelchairs
- Prosthetics
- Air Fluidized Beds
- Power Air Flotation Beds
- Augmentative Communication Devices
- Ventilators

EDME Process: Initiating Request

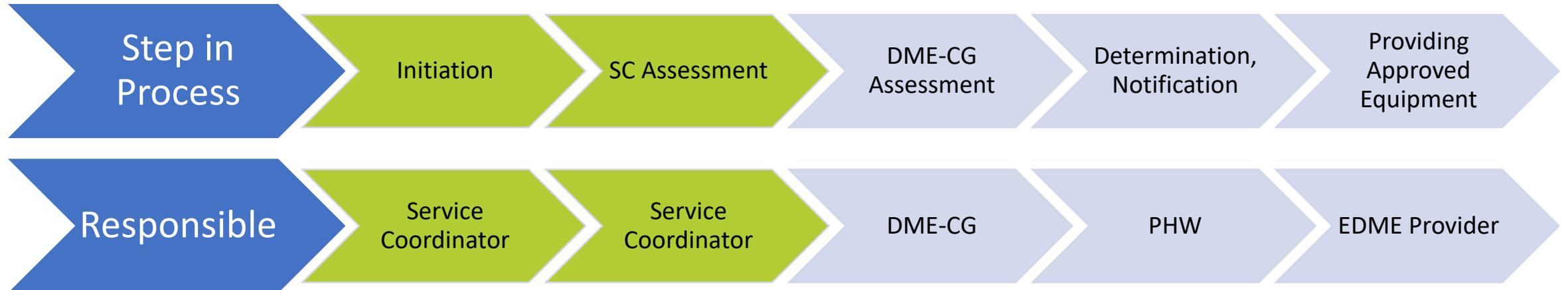
All requests start with the Service Coordinator (SC). If a provider or Nursing Facility (NF) identifies a need for a participant to have EDME, they should contact the SC for an updated assessment and service plan.



Note: Requests for DME received directly from EDME vendors will be void (exception: vents and air fluidized beds)

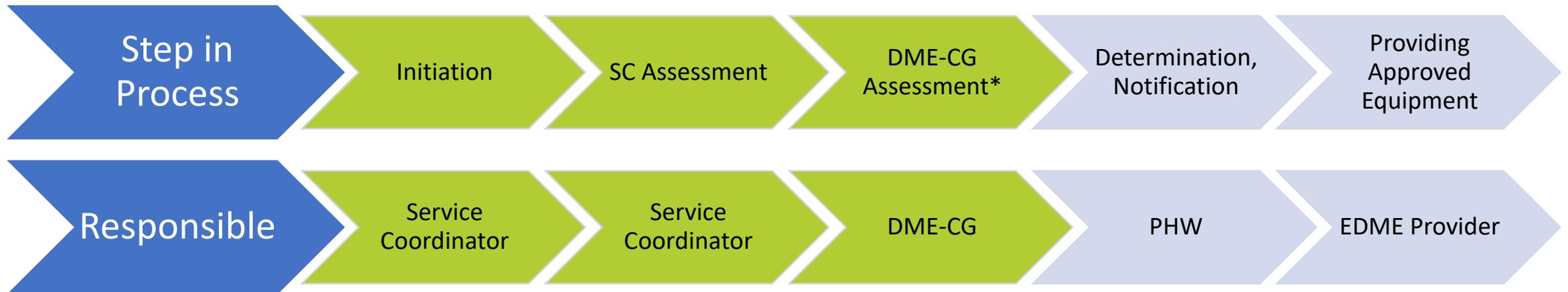
EDME Process: Assessing the Need

- The SC will complete the assessment and service plan and request any additional needed information
- The SC will submit the request to PHW



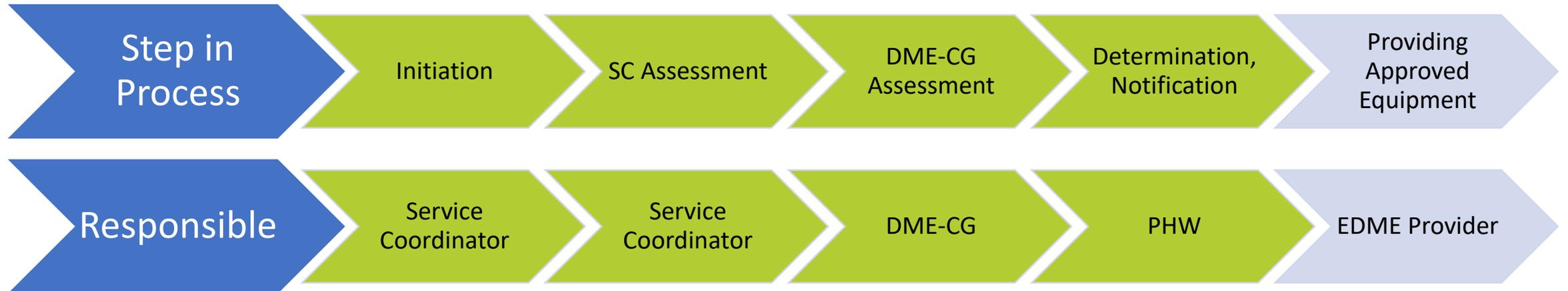
EDME Process: DME-CG Assessment

- PHW will request an assessment from DME-CG
- DME-CG will assess the Participant and submit report to PHW
- *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.



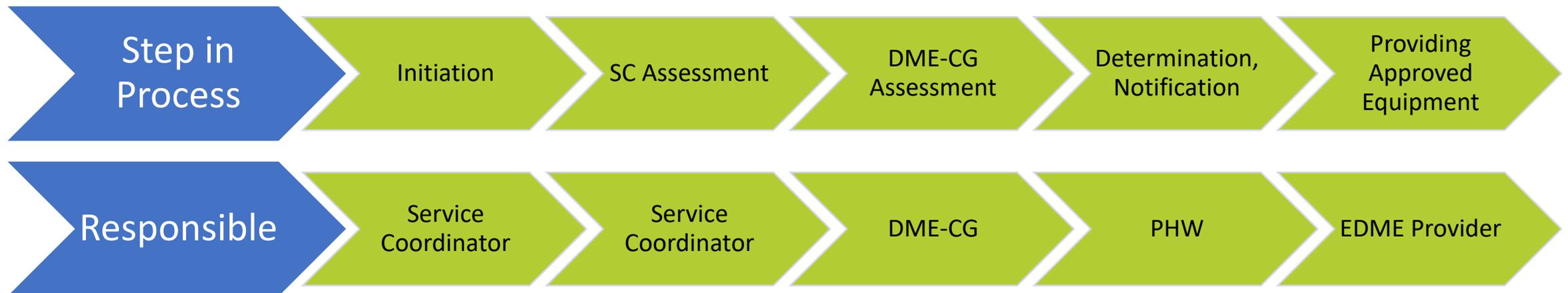
EDME Process: Determination & Notification

- Once the evaluation report is received, PHW will review the request and make a determination
- Participant will be notified of the decision



EDME Process: Providing Approved Equipment

- Provider will be selected for the provision of the equipment
 - Participant can select the EDME provider
 - PHW can choose an alternate provider if the same or similar item with the same quality of support can be provided at a lower cost
 - Review example
- Provider will supply the approved equipment & submit claim for reimbursement



PHW EDME Summary Process Chart

Step	Responsible Party	Action
Initiation	Service Coordinator	<ul style="list-style-type: none"> • All Requests begin here • Newly identified needs require updated assessment • Direct Requests from EDME Vendors Void
Assessment	Service Coordinator	<ul style="list-style-type: none"> • Assess & request necessary additional information • Submit to PHW
EDME Assessment <i>assessment completed within 3 days of request with supporting documentation</i>	DME-CG	<ul style="list-style-type: none"> • Perform in-home assessment • Peer-reviewed • DME Provider ATP included assuming participant choice (see slide 15) • Submit results to PHW
Determination & Notifications <i>determination complete within 2-days of request with supporting documentation and assessment results</i> <i>Notification mailed within 2-days of determination</i>	PHW	<ul style="list-style-type: none"> • Medical Management Review • Participant Notification

DME & EDME Repair vs. Replace

PHW will determine, on a case-by-case basis, if the item is to be repaired or replaced based on duration of ownership, CMS schedules of life expectancy, and reasonable useful lifetime.

PHW will consider repair, instead of replacement of DME if:

- the equipment can be repaired efficiently; and
- the equipment can be returned to service in a timely manner; and
- the existing item continues to meet the participant specific needs.

DME Delivery of Equipment



Medicaid DME payment includes delivery;



Medicaid does not pay additional for 'Delivery' charges;



Medicaid DME payment includes equipment assembly, participant/caregiver instructions on proper usage, adjustment of the adjustable legs to ensure safe/comfortable sitting and disposal of box into the participant's garbage can.



DME

Diagnosis
Incontinence

DME



DME items such as incontinence supplies, wipes, and barrier cream may require authorization.



RX is required if it is over the MA Fee Limit.



Please refer to the MA fee schedule as a helpful resource.



<https://www.humanservices.state.pa.us/OUTPATIENTFEESCHEDULE/Search>

DME

Miscellaneous Codes

DME- Miscellaneous Codes

Can only be used for:

- Continuity of Care (COC)
- Managed Care Organization (MCO) transfers
- Exceptional DME parts not on MA fee schedule

Example-Wipes

- W0137 is the misc. generic code. However, more appropriate to use A4335 code because that is the code on the MA fee schedule for that item.



CPAP



CPAP

- Requirements:
 - Physician Rx
 - Documentation with sleep study lab results required
 - Requests sent directly to DME provider
 - DME Provider to Submit Authorization Request
 - Secure Web Portal
 - Outpatient Medicaid Prior Authorization Form
<https://www.pahealthwellness.com/providers/resources/prior-authorization.html>
- Special Note:
 - CPAP supplies cannot be requested by SC
 - Frequency limitation: 1 every 5 years



Pre-Service Participant Verification

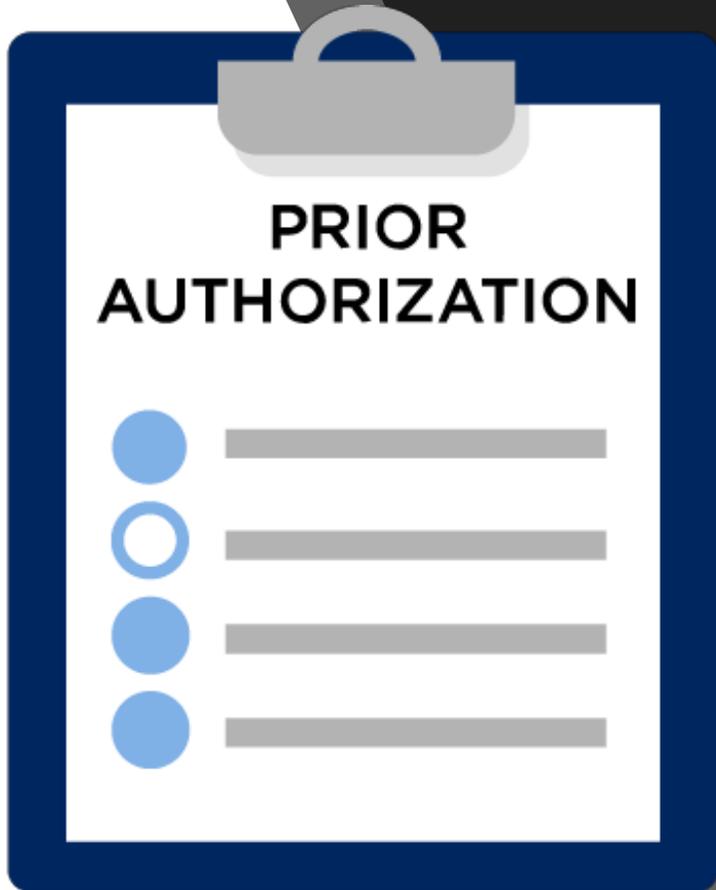
- PHW Secure Provider Portal
- PHW Automated Participant eligibility (IVR) system [1-844-626-6813](tel:1-844-626-6813)
- PHW Provider Services [1-844-626-6813](tel:1-844-626-6813)
- PA online Eligibility Verification System (EVS), PROMISe®



DME

Prior Authorization





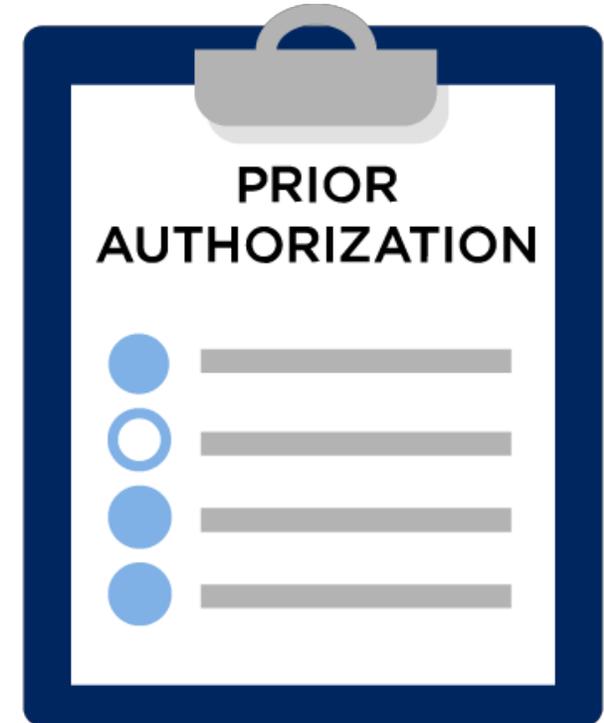
Prior Authorizations for DME

- For DME (not EDME) the preferred method for submitting authorizations is online through the Secure Provider Web Portal at: [Provider.PAHealthWellness.com](https://www.pahealthwellness.com)
- Other methods of submitting the Prior Authorization requests:
 - Call 1-844-626-6813
 - Fax the Prior Authorization fax forms posted on <https://www.pahealthwellness.com/providers/resources/prior-authorization.html>
- **Non-participating providers must submit Prior Authorization for all services**

Online Pre-Auth Check Tool

Participating provider can use the Pre-Auth Needed Tool on the website to quickly determine if a service or procedure requires prior authorization:

<https://www.pahealthwellness.com/providers/preauth-check.html>



Online Pre-Auth Check Tool

<https://www.pahealthwellness.com/providers/preauth-check.html>

Types of Services

Is the member being admitted to an inpatient facility?

Are anesthesia services being rendered for pain management or Dental services?

Are oral surgery services being provided in the office?

Are services, other than DME, orthotics, prosthetics, and supplies, being rendered in the home?

Is the member receiving hospice services?

Are services being rendered by a Chiropractor?

Enter the code of the service you would like to check:

K0108

Y

Yes

K0108 - OTHER ACCESSORY

Pre-authorization required for all providers.

Coordination of Benefits

- If a service is non-covered by Medicare, then an EOB is not required.
- For services covered by Medicare, PHW requires an EOB from the primary payer.
- If PHW is the secondary payer and the authorization is covered by Medicare, then no authorization is required.

Helpful Reminders

- Always Check Eligibility
- Always Check if Covered Benefit
- Always Check if Prior Auth Required
- Prior Auth is required for non-participating providers
- Code(s) and units on claim must match authorization (and include modifiers, as appropriate)





Key Takeaways

EDME:

- SC driven referrals – Service Coordinator needs to be manager of the participant’s case. EDME requests (except for air fluidized beds and vents) will not be accepted from the DME provider.
- Provider submitted invoice should match the EDME requested item. PHW can choose an alternate provider if the same or similar item with the same quality of support can be provided at a lower cost.

DME:

- Miscellaneous DME codes are not to be used unless for COC or MCO transfers. Use codes per the MA fee schedule.
- Always check the Prior Auth Check Tool

Summary Comparison Chart: EDME & DME

DME Type	Referral Must Start with SC?	Referral Exceptions?	Auth Required?	DME-CG Required?	Coordination of Benefits (COB)?
EDME	Yes	<ul style="list-style-type: none">• Air Fluidized Beds• Ventilators	Yes	Yes	Yes
DME	Dependent on Item(s)	Can be initiated by the DME provider	Prior Auth Check Tool	No	Yes



Thank You!

Key Contacts

Toll Free: 844-626-6813

Provider Relations:

PHWProviderRelations@PAHealthWellness.com

Provider Demographic Updates:

PHWProviderData@PAHealthWellness.com

Provider Training: PHWProviderTraining@PAHealthWellness.com

Complaints & Grievances:

PHWComplaintsandGrievances@PaHealthWellness.com

Contracting: NetworkManagement@PaHealthWellness.com

Critical Incident Reporting: Clreports@PaHealthWellness.com

Other Inquiries: Information@PAHealthWellness.com

