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Program Name: BadgerCare Plus and  
MedicaidHandbook Area: Durable Medical  
Equipment

08/02/2018

**Prior Authorization : Compression Garments**

Topic #11717

**Prior Authorization for Burn and Gradient Compression Garments**

In this topic, the term "[compression garments](#)" is used to refer to both gradient compression garments and compression burn garments, unless otherwise stated.

ForwardHealth requires PA (prior authorization) for compression garments in the following situations:

- When life expectancy has been exceeded (i.e., when greater than three garments per procedure code, per rolling 12 months for gradient compression garments or greater than eight garments per rolling 12 months for compression burn garments are medically necessary).
- When the member's diagnosis is other than a diagnosis for which billing is allowed without PA.

When submitting a PA request for compression garments, providers are required to include the following:

- PA/RF (Prior Authorization Request Form, F-11018 (05/13)).
- PA/DMEA (Prior Authorization/Durable Medical Equipment Attachment, F-11030 (07/12)).
- Member's diagnosis or medical condition.
- Copy of the signed and dated physician's prescription.
- Description of the service to be provided.
- Type of compression garment.
- Modifier RT, LT, or RA, when applicable.
- Clinical information, including the following:

- o Specific documented measurements required for the garment ordered (this information may be found on the manufacturer's order form).
- o Date(s) on which measurements were taken.
- o Appropriate periodic circumferential measurements, using consistent units of measurement (e.g., centimeters used at every measurement).
- o Reasons why life expectancy has been exceeded.
- o Reasons related to diagnosis (i.e., for diagnoses other than those for which billing is allowed without PA and those for which compression garments are contraindicated or should be used with caution).

### **Modifiers**

Providers are required to include modifier RT and/or LT on PA requests submitted for procedure codes A6504 to A6508, A6530 to A6538, A6545, A6549, and S8420 to S8429. These procedure codes are incomplete without modifier RT or LT.

Providers are reminded that if the above PA request submission requirements are not followed, the request will be returned for the missing or appropriate information.

If a provider is replacing a member's compression garment using measurements currently on file, the provider is required to use the RA modifier. However, if the garment is being replaced based on new measurements, even if there is no change to the measurements currently on file, the providers should not use the RA modifier.

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