

Affected Programs: BadgerCare Plus, Medicaid

To: Medical Equipment Vendors, Pharmacies, Physician Clinics, Physicians, HMOs and Other Managed Care Programs

New Coverage and Prior Authorization Policy for Wearable Cardioverter Defibrillators

This *ForwardHealth Update* announces new coverage and prior authorization policy for wearable cardioverter defibrillators effective for dates of service on and after October 1, 2015.

ForwardHealth covers the rental of a wearable cardioverter defibrillator (WCD) with prior authorization (PA) for members 19 years of age or older who are at high risk of sudden cardiac death. A WCD is used on an outpatient basis and is intended for short-term use under medical supervision.

Rental of a WCD includes delivery, setup, and training. Wisconsin Medicaid does not separately reimburse for cables, alarms, electrodes, belts, holsters, lead wires, battery packs, battery charger, monitor, the garment, and other supplies since those items are included in the total rental charge.

New Coverage Limitations for Rental of a Wearable Cardioverter Defibrillator

Effective for dates of service (DOS) on and after October 1, 2015, ForwardHealth will not cover the rental of a WCD in any of the following circumstances:

- The WCD is not medically necessary (e.g., the member received an implantable cardioverter defibrillator [ICD] or a heart transplant).
- The member is 18 years of age or younger.

- The member has a vision, hearing, or developmental problem that may interfere with the perception of alarms or messages from the WCD.
- The member is taking medications that would interfere with his or her ability to respond to alarms or messages from the WCD.
- The member is pregnant, breastfeeding, or of childbearing age and is not attempting to prevent pregnancy.
- The member will be exposed to high levels of electromagnetic interference that may prevent the WCD from operating.
- The member is unable or unwilling to wear the device continuously (except for bathing).
- The member has a history of acute myocardial infarction within the last 40 days.
- The member has drug-refractory class IV congestive heart failure and is not a candidate for a heart transplant.
- The member has a history of psychiatric disorders that interfere with necessary care and follow-up.
- The member has a reversible triggering factor for ventricular tachycardia or ventricular fibrillation that can be definitely identified, such as ventricular tachyarrhythmia in evolving acute myocardial infarction or an electrolyte abnormality.
- The member has a terminal illness.

Prior Authorization

Approval Criteria

According to Wis. Admin. Code § DHS 107.02(3), ForwardHealth has the authority to require and define the terms of PA for durable medical equipment (DME). Effective for DOS on and after October 1, 2015, the following criteria must be met in order for a PA request for the rental of a WCD to be approved:

- The rental of the WCD is medically necessary for a member at high risk of sudden cardiac arrest and meets the American College of Cardiology guidelines for an implantable cardioverter.
- One of the following is true:
 - ✓ The member is on the waiting list for a medically necessary heart transplant.
 - ✓ The member has an ICD that requires removal due to an infection and is waiting for a new ICD to be inserted.
 - ✓ The member has an infectious process or other temporary condition preventing the initial insertion of an ICD.

Allowable Procedure Code and Modifier

Durable medical equipment providers are required to indicate Healthcare Common Procedure Coding System procedure code K0606 (Automatic external defibrillator, with integrated electrocardiogram analysis, garment type) and modifier RR (Rental) on PA requests and claims for the rental of a WCD.

For further coverage information, providers should refer to the DME Index available on the Resources for Medical Equipment Vendor Providers page in the Providers area of the ForwardHealth Portal at: www.forwardhealth.wi.gov/WIPortal/content/provider/medicaid/MedicalEquipmentVendor/resources_25.htm.spage.

Submission

Durable medical equipment providers are required to submit the following to ForwardHealth when requesting PA for the rental of a WCD:

- A completed Prior Authorization Request Form (PA/RF), F-11018 (05/13).
- A completed Prior Authorization/Durable Medical Equipment Attachment (PA/DMEA), F-11030 (07/12). The DME provider is responsible for obtaining the required clinical information from the member's cardiologist to complete the PA/DMEA.
- A prescription from the member's cardiologist for the WCD.
- Documentation supporting the approval criteria indicated in this *ForwardHealth Update*. The DME provider is responsible for obtaining this documentation from the member's cardiologist.

Note: The cardiologist is required to be certified by the American Board of Cardiology.

Submission Options

Durable medical equipment providers may submit PA requests for the rental of a WCD using any of the following methods:

- **ForwardHealth Portal.** Prior authorization requests may be submitted on the Portal at www.forwardhealth.wi.gov/.
- **Fax.** Prior authorization requests should be faxed to 608-221-8616. If a PA request is sent to another fax number, the request may not be processed.
- **Mail.** Prior authorization requests should be mailed to the following address:

ForwardHealth
Prior Authorization
Ste 88
313 Blettner Blvd
Madison WI 53784

- **278 Health Care Services Review — Request for Review and Response (278) transaction.** The 278

transaction is the standard electronic format for health care service PA.

For specific information about each of these submission options, providers should refer to the Submission Options chapter of the Prior Authorization section of the Durable Medical Equipment service area of the ForwardHealth Online Handbook.

Information Regarding Managed Care Organizations

This *Update* contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *ForwardHealth Update* is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.

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