

Affected Programs: BadgerCare Plus, Medicaid

To: Blood Banks, Home Health Agencies, Individual Medical Supply Providers, Medical Equipment Vendors, Nurses in Independent Practice, Nursing Homes, Personal Care Agencies, Pharmacies, HMOs and Other Managed Care Programs

Changes to Coverage of Disposable Medical Supplies Under the BadgerCare Plus Benchmark Plan, Effective with the Implementation of ForwardHealth interChange

This *ForwardHealth Update* lists disposable medical supplies covered under the BadgerCare Plus Benchmark Plan, effective for dates of service on and after the October 2008 implementation of ForwardHealth interChange.

Coverage of Disposable Medical Supplies Under the BadgerCare Plus Benchmark Plan

The Attachment of this *ForwardHealth Update* provides a complete list of disposable medical supplies (DMS) covered under the BadgerCare Plus Benchmark Plan, effective for dates of service (DOS) on and after the October 2008 implementation of ForwardHealth interChange.

The following Healthcare Common Procedure Coding System codes will be considered noncovered DMS for DOS on and after ForwardHealth implementation:

- A4215 (Needle, sterile, any size, each).
- A4215 with modifier “59” (Huber needles).
- A4230 with modifier “22” (IV administration set with or without filter, specialty type).
- A4231 with modifier “22” (IV administration set with or without filter, standard type).
- A4232 with modifier “22” (IV catheter or butterfly).

- A7013 with modifier “59” (Ventilator bacteria filter).

Information Regarding Managed Care

This *Update* contains fee-for-service policy and applies to services members receive on a fee-for-service basis. For managed care policy, contact the appropriate managed care organizations. HMOs 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). Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at dhs.wisconsin.gov/forwardhealth/.

P-1250

ATTACHMENT

Disposable Medical Supplies Covered Under the BadgerCare Plus Benchmark Plan After ForwardHealth interChange Implementation

The following table lists Healthcare Common Procedure Coding System procedure codes (including modifiers) for disposable medical supplies (DMS) covered under the BadgerCare Plus Benchmark Plan for dates of service on and after the October 2008 implementation of ForwardHealth interChange. Refer to the current DMS Index for coverage limitations and maximum allowable fees for the following procedure codes.

Procedure Code	Modifier	Description
A4215	22	Insulin pen needles
A4230	—	Infusion set for external insulin pump, non needle cannula type
A4231	—	Infusion set for external insulin pump, needle type
A4232	—	Syringe with needle for external insulin pump, sterile 3cc
A4233	—	Replacement battery, alkaline (other than J cell), for use with medically necessary home blood glucose monitor owned by patient, each
A4234	—	Replacement battery, alkaline, j cell, for use with medically necessary home blood glucose monitor owned by patient, each
A4235	—	Replacement battery, Lithium, for use with medically necessary home blood glucose monitor owned by patient, each
A4236	—	Replacement battery, silver oxide, for use with medically necessary home blood glucose monitor owned by patient, each
A4250	—	Urine test or reagent strips or tablets (100 tablets or strips)
A4253	KS	Blood glucose test or reagent strips for home blood glucose monitor, per 50 strips TYPE II Diabetics
A4253	KX	Blood glucose test or reagent strips for home blood glucose monitor, per 50 strips TYPE I Diabetics
A4256	—	Normal, low and high calibrator solution/chips
A4258	—	Spring powered device for lancet, each
A4258	22	Insulin pen
A4259	KS	Lancets, per box of 100 TYPE II Diabetics
A4259	KX	Lancets, per box of 100 TYPE I Diabetics
A4556	—	Electrodes (e.g. apnea monitor), per pair
A4557	—	Lead wires, (e.g. apnea monitor) per pair
A4595	—	Electrical stimulator supplies, 2 lead per month, (e.g. TENS, NMES)
A4605	—	Tracheal suction catheter, closed system, each
A4606	—	Oxygen probe for use with oximeter device, replacement
A4624	—	Tracheal suction catheter, any type other than closed system, each

Procedure Code	Modifier	Description
A4628	—	Oropharyngeal suction catheter, each
A7000	—	Canister, disposable, used with suction pump, each
A7001	—	Canister, non-disposable, used with suction pump, each
A7002	—	Tubing, used with suction pump, each
A7003	—	Administration set, with small volume non-filtered pneumatic nebulizer, disposable
A7004	—	Small volume nonfiltered pneumatic nebulizer, disposable
A7005	—	Administration set, with small volume nonfiltered pneumatic nebulizer, non-disposable
A7006	—	Administration set, with small volume filtered pneumatic nebulizer
A7007	—	Large volume nebulizer, disposable, unfilled, used with aerosol compressor
A7007	22	Sterile water or sterile saline, 1000 ml used with large volume nebulizer
A7008	—	Large volume nebulizer, disposable, prefilled, used with aerosol compressor
A7008	22	Sterile water, heated humidifier use 1650 - 2000 cc
A7008	59	Sterile water, autofeed/heated humidifier use 1650 - 2000 cc
A7009	—	Reservoir bottle, non-disposable, used with large volume ultrasonic nebulizer
A7010	—	Corrugated tubing, disposable, used with large volume nebulizer, 100 feet
A7011	—	Corrugated tubing, non-disposable, used with large volume nebulizer, 10 feet
A7012	—	Water collection device, used with large volume nebulizer
A7013	—	Filter, disposable, used with aerosol compressor
A7014	—	Filter, non-disposable, used with aerosol compressor or ultrasonic generator
A7015	—	Aerosol mask, used with DME nebulizer
A7016	—	Dome and mouthpiece, used with small volume ultrasonic nebulizer
A7018	—	Water, distilled, used with large volume nebulizer, 1000 ml.
A7027	—	Combination oral/nasal mask, used with continuous positive airway pressure device, each
A7028	—	Oral cushion for combination oral/nasal mask, replacement only, each
A7029	—	Nasal pillows for combination oral/nasal mask, replacement only, pair
A7030	—	Full face mask used with positive airway pressure device, each
A7031	—	Face mask interface, replacement for full face mask, each
A7032	—	Cushion for use on nasal mask interface, replacement only, each
A7033	—	Pillow for use on nasal cannula type interface, replacement only, pair
A7034	—	Nasal interface (mask or cannula type) used with positive airway pressure device, with or without head strap
A7035	—	Headgear used with positive airway pressure device
A7036	—	Chin strap used with positive airway pressure device
A7037	—	Tubing used with positive airway pressure device
A7038	—	Filter, disposable, used with positive airway pressure device
A7039	—	Filter, non-disposable, used with positive airway pressure device

Procedure Code	Modifier	Description
A7046	—	Water chamber for humidifier, used with positive airway pressure device, replacement, each
A7525	—	Tracheostomy mask, each
B4035	—	Enteral feeding supply kit; pump fed, per day
S8490	—	Insulin syringes (100 syringes, any size)