

Affected Programs: BadgerCare Plus, Medicaid

To: Home Health Agencies, Medical Equipment Vendors, Nurse Practitioners, Nurses in Independent Practice, Nursing Homes, Physician Assistants, Physician Clinics, Physicians, HMOs and Other Managed Care Programs

New Coverage Policy for Negative Pressure Wound Therapy Pump, Accessories, and Supplies

To comply with the federal Consolidated Appropriation Act of 2016 and the federal 21st Century Cures Act of 2016, ForwardHealth reduced the max fee for rental of negative pressure wound therapy pumps with Healthcare Common Procedure Coding System (HCPCS) code E2402 (Negative pressure wound therapy electrical pump, stationary or portable) to the lowest corresponding 2019 Medicare max fee. As a result, ForwardHealth is clarifying what is included in the reimbursement of HCPCS code E2402. New policies outlined in this *ForwardHealth Update* are effective as of June 1, 2019.

Supplies and Accessories Are Now Separately Reimbursable

Reimbursement for the rental of negative pressure wound therapy pumps (HCPCS code E2402) no longer includes reimbursement for the canister, dressing, and related supplies. ForwardHealth will separately reimburse for the canister, dressing, and related supplies.

ForwardHealth now covers HCPCS code A6550 (Wound care set, for negative pressure wound therapy electrical pump, includes all supplies and accessories). Refer to the Disposable Medical Supplies (DMS) Index for specific coverage information.

Note: ForwardHealth continues to cover HCPCS code A7000 (Canister, disposable, used with suction pump, each).

For reimbursement and quantity limitations, providers should refer to the DMS Index on the Resources for Individual Medical Supply Providers page of the ForwardHealth Portal or the maximum allowable fee schedules by clicking the Fee Schedules link in the Providers quick links box on the home page of the Portal at www.forwardhealth.wi.gov/. Providers are required to submit a prior authorization request if quantity limits per month must be exceeded.

Rental After 90 Days

Effective for dates of service (DOS) on and after June 1, 2019, the maximum allowable fee for rental of negative pressure wound therapy pumps will no longer be reduced by half after 90 days of rental. The use of modifier 52 (Reduced Services) is no longer required after 90 days of rental. Providers are required to continue to indicate modifier RR (rental) with procedure code E2402.

Documentation and Medical Coverage Criteria

For documentation and medical coverage criteria, providers should refer to the Negative Pressure Wound Therapy Pumps topic (topic #11137) of the Home Health Equipment chapter of the Covered and Noncovered Services 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 (MCO). MCOs 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 Medicaid Services, the 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, DHS.

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

P-1250