



Healthy Blue



10040 Regency Circle, Suite 100  
Omaha, NE 68114

		<b>Reimbursement Policy</b>
<b>Subject: Durable Medical Equipment (Rent to Purchase)</b>		
Effective Date: <b>01/01/21</b>	Committee Approval Obtained: <b>01/01/21</b>	Section: <b>DME and Supplies</b>
*****The most current version of our reimbursement policies can be found on our provider website. If you are using a printed version of this policy, please verify the information by going to <a href="https://provider.healthybluene.com">https://provider.healthybluene.com</a> .*****		
<p>These policies serve as a guide to assist you in accurate claims submissions and to outline the basis for reimbursement if the service is covered by a member’s Healthy Blue benefit plan. The determination that a service, procedure, item, etc. is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis as well as to the member’s state of residence. You must follow proper billing and submission guidelines. You are required to use industry standard, compliant codes on all claim submissions. Services should be billed with CPT® codes, HCPCS codes and/or revenue codes. The codes denote the services and/or procedures performed. The billed code(s) are required to be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our policies apply to both participating and non-participating providers and facilities.</p> <p>If appropriate coding/billing guidelines or current reimbursement policies are not followed, Healthy Blue may:</p> <ul style="list-style-type: none"> <li>• Reject or deny the claim.</li> <li>• Recover and/or recoup claim payment.</li> <li>• Adjust the reimbursement to reflect the appropriate services and/or procedures performed.</li> </ul> <p>These policies may be superseded by mandates in provider or state contracts, or state, federal or CMS requirements. System logic or setup may prevent the loading of policies into the claims platforms in the same manner as described; however, Healthy Blue strives to minimize these variations.</p> <p>Healthy Blue reserves the right to review and revise its policies periodically when necessary. When there is an update we will publish the most current policy to the website.</p>		
<b>Policy</b>	<p>Healthy Blue allows reimbursement for durable medical equipment (DME) under specific guidelines unless otherwise noted by provider, state, federal or CMS contracts and/or requirements. Healthy Blue requires that all DME claims be submitted with the applicable HCPCS code(s) and have the applicable modifier appended.</p> <p>Reimbursement is based on the rental price up to the maximum allowed of the particular DME. The item is considered purchased once the purchase price has been met. There may be instances in which a</p>	

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	<p>particular item may be considered for direct purchase on a case-by-case basis.</p> <p><b>Circumstances Affecting Rental Reimbursement</b> The reimbursement limit for rented DME is 12 months. Once the limit is met, claims submitted for the rental of the item will be denied:</p> <ul style="list-style-type: none"> <li>• Rental periods that contain a break in coverage of more than 60 days will start the limitation count over.</li> <li>• On the occasion a member changes suppliers during the rental period, a new rental period will not start over.</li> </ul> <p>Healthy Blue allows reimbursement for oxygen equipment on a continuous rental basis.</p> <p>Supplies, contents and accessory components associated with oxygen rental DME are not separately reimbursed and considered all-inclusive in the rental reimbursement.</p> <p><b>Items Not Considered DME</b> The following items are not considered DME:</p> <ul style="list-style-type: none"> <li>• Prosthetics or orthotics</li> <li>• Disposable medical supplies (DMS)</li> </ul> <p><b>Note:</b> This policy does not apply to direct purchase DME.</p> <p><b>Nonreimbursable DME</b> Healthy Blue does not allow reimbursement for:</p> <ul style="list-style-type: none"> <li>• Provision of DME that exceeds the benefit limit unless authorized through medical necessity.</li> <li>• Repair or replacement of DME necessitated by abuse or neglect.</li> <li>• Repair or replacement of DME during the warranty period.</li> <li>• Enhancements or upgrades of DME for the convenience of the member or caregiver.</li> <li>• The aesthetic appearance of DME for the preference of the member or caregiver.</li> <li>• DME considered to be experimental or investigational.</li> <li>• The purchase or rental of common household items that are not medically indicated.</li> </ul> <p>DME provided by a skilled nursing facility — This equipment is normally included as part of the facility charge and is not separately reimbursable, unless otherwise stated in a provider contract.</p>
<b>History</b>	<ul style="list-style-type: none"> <li>• Initial approval and effective date <b>01/01/21</b></li> </ul>
<b>References and Research Materials</b>	<p>This policy has been developed through consideration of the following:</p> <ul style="list-style-type: none"> <li>• CMS</li> <li>• State Medicaid</li> </ul>

	<ul style="list-style-type: none"><li>• State contracts</li><li>• 42 CFR §440.2 — Federal Regulations on Scope of Practice</li></ul>
<b>Definitions</b>	<ul style="list-style-type: none"><li>• <b>General Reimbursement Policy Definitions</b></li></ul>
<b>Related Policies</b>	<ul style="list-style-type: none"><li>• Locum Tenens Physicians</li><li>• Professional Anesthesia Services</li><li>• Reimbursement of Sanctioned and Opt-Out Providers</li></ul>
<b>Related Materials</b>	<ul style="list-style-type: none"><li>• EDI Claims Companion Guide for Professional Services</li></ul>