

DME PRIOR AUTHORIZATION SUPPORTING DOCUMENTS

DME Prior Authorization Requests must include the following documentation.

Breast Pumps

- Prescription from ordering provider
- Cost of the breast pump (billed amount)

CPAP/BiPap

Supplies under \$500 per line item do not require a Prior Authorization

• Initial Request

- Treating physician's order no older than 6 months
- Sleep Study medical records documenting the patient's medical condition to substantiate the necessity for the type and quantity of items ordered
- Medical records that documentation a face-to-face encounter between the member and the ordering provider
- Monthly billed amount per line item
- o Purchase Price per line item

Continued Rental Request

- Re-evaluation completed by the provider documenting the proper use of the device and continued benefit to the member.
 - Member must be reevaluated every 90 days
- Proof member used the device for a consecutive 30 day period
- Medical records that document a face-to-face encounter between the member and the ordering provider
- Monthly billed amount per line item
- Purchase Price per line item



Oxygen

***Supplies under \$500 per line item do not require a Prior Authorization ***

• Members Under age 65:

- Initial Request:
 - Treating physician's order. Order must indicate if the request is for a long-term or short-term rental.
 - Medical records documenting the patient's medical condition to substantiate the necessity for the items ordered
 - Medical records that documentation a face-to-face encounter between the member and the ordering provider
- Continued Rental Request:
 - Treating physician's order. Order must indicate if the request is for a long-term or short-term rental.
 - Reevaluation completed by the provider documenting the proper use of the device and continued benefit to the member.
 - Medical records that documentation a face-to-face encounter between the member and the ordering provider

• Members Age 65 and Older:

- Initial Rental Request:
 - Treating physician's order. Order must indicate if the request is for a long-term or short-term rental.
 - Medical records documenting the patient's medical condition to substantiate the necessity for the items ordered
 - Medical records that documentation a face-to-face encounter between the member and the ordering provider
 - Proof of the blood gas study within 30 days prior to the request date
- Continued Rental Request:
 - Treating physician's order. Order must indicate if the request is for a long-term or short-term rental.
 - Reevaluation completed by the provider documenting the proper use of the device and continued benefit to the member.
 - Medical records that documentation a face-to-face encounter between the member and the ordering provider
 - Documentation for oxygen saturations summary reports.