



Connecticut Medical Assistance Program
Policy Transmittal 2014-03

PB 2014-05
January 2014

Roderick L. Bremby, Commissioner

Effective Date: March 1, 2014

TO: Medical Equipment Devices and Supplies (MEDS), Nursing Facility (NF) and Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) Providers

RE: New Policies and Procedures Regarding Requirements for Payment of Customized Wheelchairs

The purpose of this Policy Transmittal is to notify providers that the Department is implementing new policies and procedures regarding Requirements for Payment of Customized Wheelchairs as mandated by section 8 of Public Act 12-1 of the December 2012 special session, an Act Concerning Deficit Mitigation (codified at section 17b-278i of the Connecticut General Statutes, as further amended by section 85 of Public Act 13-234). The Department is implementing these policies and procedures in draft regulation form pending final adoption of the regulation pursuant to Conn. Gen. Stat. § 17b-278i, as amended. The policies and procedures can be accessed via the Department of Social Services website at www.ct.gov/dss, select "Publications", then "Policies and Regulations", then "Notices of Intent, Operational Policies, and Proposed Regulations" then "Requirements for Payment of Customized Wheelchairs". The new policies and procedures reflect a number of changes, including to repeal section 17-134d-46 of the Regulations of Connecticut State Agencies (current regulations regarding customized wheelchairs for members living in NFs and ICFs/IID) and make changes to the Department's existing regulations on Durable Medical Equipment, among other technical changes to existing regulations necessary to correct references.

The policies and procedures are effective on March 1, 2014 for all prior authorization (PA) requests submitted on or after that date. Please review the draft regulation carefully, including the following policies and procedures:

- The new requirements apply to both members living in an NF or ICF/IID and also members living in the community.
- Requirements relating to customized wheelchairs have been removed from the Department's regulations on durable medical equipment to be consolidated into the new regulations.
- The process and the associated required documents for evaluating a member living in a NF or ICF/IID have been modified and streamlined.
- A number of requirements have been added for a member living in the community who needs a customized wheelchair, including a requirement

for an initial clinical determination by a therapist who is not associated with a DME provider.

- The Department requires refurbished customized wheelchairs and other designated equipment (currently, standard wheelchairs, medical scooters, medical strollers, hospital beds, specialty beds, patient lifts, and standers) to be used whenever practicable. Refurbished equipment, parts and components must be considered as the first option before requesting new equipment. To implement this requirement, customized wheelchairs and other designated equipment (standard wheelchairs, medical scooters, medical strollers, hospital beds, patient lifts, and standers) will be the Department's property. A member may continue to use the customized wheelchair or other designated equipment for as long as it is medically necessary. The list of codes will be posted to the CHNCT website www.huskyhealth.com. Follow the same path outlined below.

Equipment Reuse Project Administered by the New England Assistive Technology Equipment Reuse Center

In conjunction with the new requirements for payment of customized wheelchairs the Department has partnered with the New England Assistive Technology Center (NEAT), which will be the Department's contractor for collecting, storing, sanitizing, inventorying, labeling and redistributing gently used equipment in good working condition to members. Currently, customized and standard wheelchairs, hospital beds, patient lifts and standers must be reused when possible. NEAT will coordinate with DME vendors who will provide and bill for substantial repairs, new accessories and modifications. An invitation to an orientation to the NEAT online system will be sent shortly.

Please refer to the new Wheeled Mobility Device page on the Husky Health website at www.huskyhealthct.org/providers/providers_wheeled_mobility.html for polices, forms and companion documents related to customized wheelchairs. The

following documents and forms can be accessed at this location:

- Wheeled Mobility Device Guideline Letter of Medical Necessity (LMN) form (PA request form) in both pdf and Word formats;
- Wheeled Mobility Device Accessibility Survey in both pdf and Word formats;
- Definition of Standard wheelchair;
- Form documenting whether or not refurbished wheelchairs and other equipment designated above (hospital beds, patient lifts, and standers) and applicable parts, components, and accessories of those items for which PA is requested are available through NEAT; and
- Form that must accompany each wheelchair and other equipment designated above (hospital beds, patient lifts, and standers) when it is delivered to the member.

At this time, there is no change to procedures or requirements for claims submission or processing.

For questions about billing or for further assistance to access the fee schedule on the Connecticut Medical Assistance Program Website, please contact the HP Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

Posting Instructions: Policy transmittals can be downloaded from the Connecticut Medical Assistance Program Website at www.ctdssmap.com

Distribution: This policy transmittal is being distributed to holders of the Connecticut Medical Assistance Program Provider Manual by HP Enterprise Services.

Responsible Units: For questions regarding the prior authorization process documented on www.huskyhealth.org/providers contact Community Health Network of CT (CHNCT) at 800-440-5071 or DMETeam @chnct.org. For questions on the Requirements for Payment of Customized Wheelchairs contact Barbara Fletcher, Health Program Supervisor at DSS at 860-424-5136.

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