

Information for Durable Medical Equipment (DME) Vendors

The purpose of a *health lines* BULLETIN is to provide periodic updates and reminders for our provider network community. This BULLETIN is intended to provide a general overview specific to the DME provider community regarding the following items of importance for 2012:

- Prior authorization changes.
- Contract requirements and compliance.
- Friendly reminders.

Prior Authorization Changes for DME

Each year, UCare reviews the prior authorization grid and makes necessary changes for the upcoming year. The 2012 prior authorization grid has been finalized and you may find it in UCare's web site by logging on to www.ucare.org/providers/pages/authgrids.aspx.

Services	Prior Authorization Requirements *	Products	Approval Authority
Dental Services	Certain dental procedures require prior authorization. Contact DentaQuest	MSHD MSC+ ** SNBC (UCare Connect) ** PMAP MinCare UCare for Seniors MN UCare for Seniors WI	DentaQuest DentaQuest DentaQuest DentaQuest DentaQuest Prior Authorization is not required Prior Authorization is not required
RENTAL Durable Medical Equipment (DME) Prior authorization requirements for wheelchair and wheelchair accessories are listed in the section titled "Wheelchair and Wheelchair Accessories". Authorizing entity reserves the right to determine rental vs. purchase. Repair/replacement of rental accessories on rental equipment is not covered – it is provider responsibility.	Prior to 5 th month of rental Excludes: • Oxygen (equipment only) • Insulin pumps • Ventilators • Nebulizers • Enteral Feeding Pumps	MSHD MSC+ ** SNBC (UCare Connect) ** PMAP MinCare UCare for Seniors MN UCare for Seniors WI	MMSI, UCare for all others MMSI, UCare for all others UCare, MMSI UCare, MMSI UCare, MMSI Aspen, MMSI, UCare for all others UCare

Note:
 * Submit authorization requests 14 calendar days prior to the start of service for non-urgent conditions.
 • All services subject to member eligibility and benefit coverage.
 • Clinical criteria determined by product.
 • No authorization is needed for Orthotics and Prosthetics.
 • UCare reserves the right to review and verify medical necessity for all services.

** Medicare benefits must be utilized for Medicare eligible/covered services or equipment for MSC+ and SNBC (UCare Connect) members if Medicare is primary. Obtain verification from DHS (MN-ITS) regarding Medicare coverage.

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Beginning 1/1/12, here are a few key changes: **1)** Bi-level positive airway pressure (BiPAP) and continuous positive airway pressure (CPAP) devices will require prior authorization for rental equipment prior to the 5th month; and **2)** BiPAP and CPAP devices will also no longer be eligible for first month purchase. Instead, it must follow the rent to purchase guidelines.

Online Resource – UCare Provider Portal

Did you know that you can access information right at your fingertips, instead of calling? The UCare Provider Portal offers easy access to the following information:

- Member eligibility.
- Claim status.
- Authorization status.
- Explanation of Payments (EOPs).
- Provider Online Forms (e.g., Facility Change Form).

The UCare Provider Portal also allows you to submit a question to the Provider Assistance Center through the message center. To access the UCare Provider Portal just log on to **www.ucare.org**. Select “Providers” and then “UCare Provider Portal.”

Please note that a username and password is required to log into the UCare Provider Portal. Therefore, please check with your organization’s UCare Provider Portal administrator to get set up with a user account. If your organization does not have a UCare Provider Portal administrator yet, you may register for an administrator account and assign users within your organization.

Contract Requirements and Compliance

UCare is contracted with the state, Minnesota Department of Human Services (DHS), and the federal government, Centers for Medicare & Medicaid Services (CMS), to provide covered services for our members. Therefore, UCare follows DHS and CMS claims processing supplier guidelines.

In compliance with state and federal laws, contracted providers agree to comply fully with all applicable state and federal statutes, rules, and regulations pertaining to the delivery of covered services, including but not limited to:

- Medicare laws, regulations, and CMS instructions, as well as UCare’s contractual obligations with CMS, as applicable.
- All state and federal laws applicable to entities which receive federal funds, including but not limited to the Stark Law set forth under 42 U.S.C. §1395nn and 42 C.F.R. § 411.350 through § 411.389, the federal Anti-Kickback Law set forth under 42 U.S.C. § 1320a-7b and related regulations, and the federal False Claims Act set forth under 42 U.S.C. §3729 and related regulations.
- All applicable laws and regulations promulgated under Title VI of the Civil Rights Act of 1964, the Age Discrimination Act of 1975, and the Americans with Disabilities Act.

Prior to extending a contract, the following contract and eligibility requirements are reviewed, including but not limited to the following:

- Must be enrolled with CMS and DHS.
- Pass the Office of Inspector General Office (OIG) verification.
- Pass the Excluded Parties Listing Systems (EPLS) verification.
- Must be licensed to do business in the state of Minnesota.
- Must be accredited by an approved Medicare accreditation organization. (Note, not all providers who dispense DME, prosthetics, orthotics, and supplies are required to be accredited by CMS. Please refer to the Medicare Provider-Supplier Enrollment Overview in CMS’ web site for more information.)
- Must have a surety bond that covers \$50,000 per dispensing location.
- Must have general and professional liability coverage that includes a minimum of \$1 million occurrence/aggregate under “Products – COMP/OP AGG.”

Friendly Reminders on Dispensing

We would like to remind you of the following for dispensing items:

- Dispense no more than one month of supplies at a time, unless specifically permitted by coverage policy.
- Requests must come from the recipient or an authorized representative each time additional supplies are needed.
- It is acceptable for medical supply providers to call the recipient to verify a re-order.
- Automatically shipping supplies without an indication from the recipient or the recipient’s authorized representative confirmation is not permitted.

If you have questions or concerns regarding any of the information in this *health lines* BULLETIN, please contact UCare’s Provider Assistance Center by calling **612-676-3300** or **1-888-531-1493** (toll free) Monday through Friday, 7 a.m. to 5 p.m.