

Bulletin Number: MSA 21-23

Distribution: Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Providers, Practitioners, Medicaid Health Plans (MHPs), Integrated Care Organizations (ICOs)

Issued: July 1, 2021

Subject: Prior Authorization (PA) Requirements for Wearable Cardioverter Defibrillators

Effective: August 1, 2021

Programs Affected: Medicaid, Healthy Michigan Plan, Children's Special Health Care Services (CSHCS)

This policy applies to Medicaid Fee-for-Service (FFS). MHPs and ICOs must provide the full range of covered services described in this policy at a minimum and may choose to provide services over and above those specified. For beneficiaries enrolled in an MHP or ICO, the provider must check with the beneficiary's health plan for prior authorization (PA) requirements.

The purpose of this bulletin is to inform providers of changes to the Michigan Department of Health and Human Services (MDHHS) policy regarding PA periods for wearable cardioverter defibrillators (WCDs). The changes in this policy are effective for PA requests received by MDHHS on or after August 1, 2021.

Prior Authorization Periods

PAs are approved for 60 days at a time for a maximum of four months. For consideration of a second 60-day authorization period, the compliance download data for the previous 60-day initial authorization must be submitted with the PA request. The provider may submit an authorization request 15 days prior to the end of the initial approval period; however, there must be a minimum of 45 days wear time download data submitted with the authorization request.

Requests for continued PA beyond the maximum of four months will be considered on a case-by-case basis. Subsequent approvals will be for month-to-month periods. All other policy standards of coverage, documentation, PA requirements and payment rules remain unchanged.

Manual Maintenance

Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 1-800-292-2550. Atypical Providers may phone toll-free 1-800-979-4662.

An electronic version of this document is available at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Approved

A handwritten signature in black ink, appearing to read 'K. Massey', with a long horizontal flourish extending to the right.

Kate Massey, Director
Medical Services Administration