

CHANGES TO MEDICAL NECESSITY REVIEW CRITERIA FOR HOME PULSE OXIMETRY AND CONTINUOUS PASSIVE MOTION (CPM)

Applies to: Commercial - HMO POS PPO Medicare Advantage Network list: <u>https://wa-provider.kaiserpermanente.org/communications/letters</u>

Effective May 1, 2024, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) is updating its payment methodology for home pulse oximetry and continuous passive motion (CPM), non-knee.

Explanation of the change:

Kaiser Permanente is aligning its payment methodology for home pulse oximetry (CPT A4606, E0445) and continuous passive motion, non-knee device (E0936) to align with CMS payment methodology. These items will no longer be separately reimbursed in the home setting.

Clinical review criteria and affected CPT codes can be found on the Kaiser Permanente provider website at:

Home pulse oximetry:

https://wa-provider.kaiserpermanente.org/static/pdf/hosting/clinical/criteria/pdf/home_pulse_oximetry.pdf DME: https://wa-provider.kaiserpermanente.org/static/pdf/hosting/clinical/criteria/pdf/dme.pdf

Is prior authorization required?

- KFHPWA Health Maintenance Organization (HMO) members: Prior authorization is required.
- KFHPWAO Point of Service (POS) members: Prior authorization is required for in-network coverage.
- KFHPWAO Preferred Provider Organization (PPO) members: Prior authorization is not required.

Questions: Contact Provider Assistance Unit at 1-888-767-4670, Monday through Friday, 8 a.m. to 5 p.m.

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Kaiser Foundation Health Plan of Washington Kaiser Foundation Health Plan of Washington Options, Inc. <CONTRACT MANAGER NAME> Provider Communications, RCR-A3W-04 PO Box 34262, Seattle, WA 98124-1262



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