OVERVIEW
This policy will discuss the application of proper coding and payment rules for multi-function home ventilators. Multi-function home ventilators add capabilities beyond standard home ventilator modes to incorporate the functionality of suction, oxygen concentrator, nebulizer, and cough stimulation. This creates the possibility that one piece of equipment may be able to replace numerous and different pieces of equipment. These different pieces of equipment may be considered not separately reimbursed when billed concurrently with a multi-function home ventilator rental.

MEDICAL CRITERIA
Not applicable

PRIOR AUTHORIZATION
Not applicable

POLICY STATEMENT
BlueCHiP for Medicare and Commercial Products
If a claim is received for the rental of a multi-function home ventilator, claims for the rental of separate stand-alone devices and related accessories will be considered not separately reimbursed during the rental period. These devices and accessories include:

- Ventilators
- Oxygen and oxygen equipment
- Nebulizers and related accessories
- Aspirator and related accessories
- Cough Stimulator (multiple items):
  - Mechanical In-Exsufflation devices and related accessories
  - High Frequency Chest Wall Oscillation Devices (HFCWO) and related accessories
  - Oscillatory positive expiratory pressure device (e.g. Flutter, Acapella and similar items)
- PAP and RAD devices and related accessories
- Oral Appliances

COVERAGE
Benefits may vary between groups and contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage or Subscriber Agreement for applicable durable medical equipment benefits/coverage.

BACKGROUND
Under Medicare, ventilators fall under the frequent and substantial servicing DME payment category described in Section 1834(a)(3) of the Social Security Act. Payment for items falling under the frequent and substantial servicing payment category is made on a monthly rental basis until medical necessity ends and includes payment for all related accessories necessary for the effective use of the equipment. Recently, the Food & Drug Administration (FDA) cleared a new type of ventilator that integrates multiple therapies into a single device for ventilator-dependent patients. This new multi-function ventilator can also function as an oxygen concentrator, cough stimulator, aspirator and nebulizer. The multi-function ventilator replaces the multiple stand-alone
devices (for example, a separate ventilator, oxygen concentrator, and so forth) that beneficiaries may need over time. CMS added a special payment rule to the regulations at 42 CFR 414.222 to address payment for this new type of multi-function ventilator.

CODING
BlueCHiP for Medicare and Commercial Products
The following CPT codes are considered not separately reimbursed when billed with E0467RR (Home ventilator, multi-function respiratory device, also performs any or all of the additional functions of oxygen concentration, drug nebulization, aspiration, and cough stimulation, includes all accessories, components and supplies for all functions) during the rental period:

A4216  Sterile water, saline and/or dextrose, diluent/flush, 10 ml
A4217  Sterile water/saline, 500 ml
A4604  Tubing with integrated heating element for use with positive airway pressure device
A4605  Tracheal suction catheter, closed system, each
A4619  Face tent
A4624  Tracheal suction catheter, any type other than closed system, each
A4628  Oropharyngeal suction catheter, each
A7000  Canister, disposable, used with suction pump, each
A7001  Canister, nondisposable, used with suction pump, each
A7002  Tubing, used with suction pump, each
A7003  Administration set, with small volume nonfiltered pneumatic nebulizer, disposable
A7004  Small volume nonfiltered pneumatic nebulizer, disposable
A7005  Administration set, with small volume nonfiltered pneumatic nebulizer, nondisposable
A7006  Administration set, with small volume filtered pneumatic nebulizer
A7007  Large volume nebulizer, disposable, unfilled, used with aerosol compressor
A7012  Water collection device, used with large volume nebulizer
A7013  Filter, disposable, used with aerosol compressor or ultrasonic generator
A7014  Filter, nondisposable, used with aerosol compressor or ultrasonic generator
A7015  Aerosol mask, used with DME nebulizer
A7017  Nebulizer, durable, glass or autoclavable plastic, bottle type, not used with oxygen
A7020  Interface for cough stimulating device, includes all components, replacement only
A7025  High frequency chest wall oscillation system vest, replacement for use with patient-owned equipment, each
A7026  High frequency chest wall oscillation system hose, replacement for use with patient-owned equipment, each
A7027  Combination oral/nasal mask, used with continuous positive airway pressure device, each
A7028  Oral cushion for combination oral/nasal mask, replacement only, each
A7029  Nasal pillows for combination oral/nasal mask, replacement only, pair
A7030  Full face mask used with positive airway pressure device, each
A7031  Face mask interface, replacement for full face mask, each
A7032  Cushion for use on nasal mask interface, replacement only, each
A7033  Pillow for use on nasal cannula type interface, replacement only, pair
A7034  Nasal interface (mask or cannula type) used with positive airway pressure device, with or without head strap
A7035  Headgear used with positive airway pressure device
A7036  Chinstrap used with positive airway pressure device
A7037  Tubing used with positive airway pressure device
A7038  Filter, disposable, used with positive airway pressure device
A7039  Filter, nondisposable, used with positive airway pressure device
A7044  Oral interface used with positive airway pressure device, each
A7045  Exhalation port with or without swivel used with accessories for positive airway devices, replacement only
A7046  Water chamber for humidifier, used with positive airway pressure device, replacement, each
A7047  Oral interface used with respiratory suction pump, each
A7525  Tracheostomy mask, each
E0424  Stationary compressed gaseous oxygen system, rental; includes container, contents, regulator, flowmeter, humidifier, nebulizer, cannula or mask, and tubing
E0431  Portable gaseous oxygen system, rental; includes portable container, regulator, flowmeter, humidifier, cannula or mask, and tubing
E0433  Portable liquid oxygen system, rental; home liquefier used to fill portable liquid oxygen containers, includes portable containers, regulator, flowmeter, humidifier, cannula or mask and tubing, with or without supply reservoir and contents gauge
E0434  Portable liquid oxygen system, rental; includes portable container, supply reservoir, humidifier, flowmeter, refill adaptor, contents gauge, cannula or mask, and tubing
E0439  Stationary liquid oxygen system, rental; includes container, contents, regulator, flowmeter, humidifier, nebulizer, cannula or mask, & tubing
E0441  Stationary oxygen contents, gaseous, 1 month's supply = 1 unit
E0442  Stationary oxygen contents, liquid, 1 month's supply = 1 unit
E0443  Portable oxygen contents, gaseous, 1 month's supply = 1 unit
E0444  Portable oxygen contents, liquid, 1 month's supply = 1 unit
E0447  Portable oxygen contents, liquid, 1 month's supply = 1 unit, prescribed amount at rest or nighttime exceeds 4 liters per minute (LPM)
E0465  Home ventilator, any type, used with invasive interface, (e.g., tracheostomy tube)
E0466  Home ventilator, any type, used with noninvasive interface, (e.g., mask, chest shell)
E0470  Respiratory assist device, bi-level pressure capability, without backup rate feature, used with noninvasive interface, e.g., nasal or facial mask (intermittent assist device with continuous positive airway pressure device)
E0471  Respiratory assist device, bi-level pressure capability, with back-up rate feature, used with noninvasive interface, e.g., nasal or facial mask (intermittent assist device with continuous positive airway pressure device)
E0472  Respiratory assist device, bi-level pressure capability, with backup rate feature, used with invasive interface, e.g., tracheostomy tube (intermittent assist device with continuous positive airway pressure device)
E0482  Cough stimulating device, alternating positive and negative airway pressure
E0483  High frequency chest wall oscillation system, includes all accessories and supplies, each
E0484  Oscillatory positive expiratory pressure device, nonelectric, any type, each
E0486  Oral device/appliance used to reduce upper airway collapsibility, adjustable or nonadjustable, custom fabricated, includes fitting and adjustment
E0561  Humidifier, nonheated, used with positive airway pressure device
E0562  Humidifier, heated, used with positive airway pressure device
E0565  Compressor, air power source for equipment which is not self-contained or cylinder driven
E0570  Nebulizer, with compressor
E0572  Aerosol compressor, adjustable pressure, light duty for intermittent use
E0585  Nebulizer, with compressor and heater
E0600  Respiratory suction pump, home model, portable or stationary, electric
E0601  Continuous positive airway pressure (CPAP) device
E1372  Immersion external heater for nebulizer
E1390  Oxygen concentrator, single delivery port, capable of delivering 85 percent or greater oxygen concentration at the prescribed flow rate
E1391  Oxygen concentrator, dual delivery port, capable of delivering 85 percent or greater oxygen concentration at the prescribed flow rate, each
E1392  Portable oxygen concentrator, rental
E1405  Oxygen and water vapor enriching system with heated delivery
E1406  Oxygen and water vapor enriching system without heated delivery
K0738 Portable gaseous oxygen system, rental; home compressor used to fill portable oxygen cylinders; includes portable containers, regulator, flowmeter, humidifier, cannula or mask, and tubing

RELATED POLICIES
Durable Medical Equipment (DME)

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REFERENCES: