

Children's Hospital and Health System Children's Community Health Plan Policy and Procedure

This policy applies to the following entity(s):

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| <input type="checkbox"/> CHW – Milwaukee | <input type="checkbox"/> CHW - Fox Valley |
| <input type="checkbox"/> CHHS Foundation | <input type="checkbox"/> CHW - Surgicenter |
| <input type="checkbox"/> CHW – Community Services Division | <input checked="" type="checkbox"/> Children's Community Health Plan |
| <input type="checkbox"/> Children's Medical Group - Primary Care | <input type="checkbox"/> Children's Specialty Group |
| <input type="checkbox"/> Children's Medical Group - Urgent Care | <input type="checkbox"/> CHHS Corporate Departments |

Medical Utilization Management Policy

SUBJECT: Replacement and repair of durable medical equipment

INCLUDED PRODUCT(S):

Medicaid

BadgerCare Plus

Care4Kids Program

Commercial

Together with CCHP

Marketplace

Together with CCHP

PURPOSE OR DESCRIPTION:

The purpose of this policy is to describe the conditions for the appropriate repair or replacement of medically necessary, covered durable medical equipment (DME).

POLICY

1. Scope

- a. This policy will be superseded by any specific repair/replacement policy for the DME item in question. If CCHP has no specific repair/replacement policy for the DME item in question, then this general policy will apply.

2. Repair

Effective: 9/17

Reviewed:

Revised:

Developed by: CCHP Medical Directors and Executive Director Health Plan Clinical Services

- a. Repairs to a covered, member-owned DME item may be considered medically necessary when, due to reasonable wear or due to accidental damage, repairs are required to make the DME item functional.
3. Replacement
- a. Replacement of a covered, member-owned DME item may be considered medically necessary if, due to reasonable deterioration over time or accidental damage, the item is non-functional and cannot be repaired. Accessory add-ons and upgrades of an existing DME item may be considered not medically necessary when a current DME item is functional and meets the member's current basic functional medical needs.

REFERENCES

1. <https://www.premera.com/medicalpolicies/1.01.526.pdf>

Effective: 9/17

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Revised:

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