

## MEDICAID POLICY INFORMATION SHEET

**Policy Analyst:** Lisa Trumbell

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Initial ☐

Public Comment ☒

Final ☐

### Brief description of policy:

This policy revises the documentation requirements for home oxygen therapy.

### Reason for policy (problem being addressed):

The current oxygen documentation requirements are outdated. The Michigan Department of Health and Human Services (MDHHS) has received an increase in provider inquiries regarding current documentation requirements for home oxygen. This policy clarifies MDHHS oxygen documentation requirements for durable medical equipment providers.

### Budget implication:

☒ budget neutral

☐ will cost MDHHS \$ , and (select one) budgeted in current appropriation

☐ will save MDHHS \$

### Is this policy change mandated per federal requirements?

No

### Does policy have operational implications on other parts of MDHHS?

No

### Does policy have operational implications on other departments?

No

### Summary of input:

☐ controversial

☐ acceptable to most/all groups

☐ limited public interest/comment

### Supporting Documentation:

State Plan Amendment Required: ☐ Yes ☒ No

If Yes, please provide status:

☐ Approved

☐ Pending

☐ Denied

Date:

Approval

Date:

Public Notice Required: ☐ Yes ☒ No

If yes,

Submission Date:

<b>DRAFT FOR PUBLIC COMMENT</b>  <b>Michigan Department of Health and Human Services</b>		
	<b>Project Number:</b> 1921-DMEPOS	<b>Date:</b> August 5, 2019

**Comments Due:** September 9, 2019  
**Proposed Effective Date:** November 1, 2019  
**Direct Comments To:** Lisa Trumbell, DMEPOS Specialist  
**Address:** Program Policy Division/MDHHS/MSA/CCC 7<sup>th</sup> Floor  
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<b>Policy Subject:</b> Documentation Revisions for Home Oxygen Therapy	
<b>Affected Programs:</b> Medicaid, Healthy Michigan Plan, Children's Special Health Care Services (CSHCS)	
<b>Distribution:</b> Durable Medical Equipment Providers, Practitioners, Medicaid Health Plans, Integrated Care Organizations (ICOs)	
<b>Summary:</b> This policy revises the documentation requirements for home oxygen therapy.	
<b>Purpose:</b> The current oxygen documentation requirements are outdated. The Michigan Department of Health and Human Services (MDHHS) has received an increase in provider inquiries regarding current documentation requirements for home oxygen. This policy clarifies MDHHS oxygen documentation requirements for durable medical equipment providers.	
<b>Cost Implications:</b> Budget neutral.	
<b>Potential Hearings &amp; Appeal Issues:</b> No	
<b>State Plan Amendment Required:</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <b>If yes, date submitted:</b>	<b>Public Notice Required:</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <b>Submitted date:</b>
<b>Tribal Notification:</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> - <b>Date:</b>	
<b>THIS SECTION COMPLETED BY RECEIVER</b>	
<input type="checkbox"/> <b>Approved</b>	<input type="checkbox"/> <b>No Comments</b>
<input type="checkbox"/> <b>Disapproved</b>	<input type="checkbox"/> <b>See Comments Below</b>
	<input type="checkbox"/> <b>See Comments in Text</b>
<b>Signature:</b>	<b>Phone Number</b>
<b>Signature Printed:</b>	
<b>Bureau/Administration</b> <i>(please print)</i>	<b>Date</b>

# Proposed Policy Draft

Michigan Department of Health and Human Services  
Medical Services Administration

**Distribution:** Durable Medical Equipment Providers, Practitioners, Medicaid Health Plans, Integrated Care Organizations

**Issued:** October 1, 2019 (Proposed)

**Subject:** Documentation Revisions for Home Oxygen Therapy

**Effective:** November 1, 2019 (Proposed)

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

This policy applies to Medicaid Fee-for-Service (FFS). Medicaid Health Plans (MHPs) and Integrated Care Organizations (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, the provider must check with the beneficiary's health plan for prior authorization (PA) requirements.

The purpose of this bulletin is to update policy and provide clarification regarding documentation requirements for home oxygen therapy. This policy is effective November 1, 2019.

## **Documentation**

The following revision is made to the required documentation for home oxygen therapy:

- Current pO<sub>2</sub> or oxygen saturation level while on room air.

## **Six-Month Recertification**

After the initial prescription for home oxygen therapy, a six-month follow-up certificate of medical necessity (CMN) must be obtained. At this time, a new pO<sub>2</sub> or oxygen saturation test with the beneficiary on room air must be obtained and indicated on the CMN, along with the date of the test, to substantiate continued need for treatment.

## **Annual Recertification**

Following the first year of oxygen treatment, a new CMN is required annually. An updated lab test is not required unless there is a change in the level of oxygen usage or type of delivery system required. The most recent pO<sub>2</sub> or oxygen saturation level and the date of the test must be documented on each annual CMN.

All other documentation requirements indicated in current policy remain unchanged.