

Secretary of State
NOTICE OF PROPOSED RULEMAKING HEARING
A Statement of Need and Fiscal Impact accompanies this form.

Oregon Health Authority (OHA), Division of Medical Assistance Programs (Division)	410	
Agency and Division	Administrative Rules Chapter Number	
Sandy Cafourek	500 Summer St NE, Salem, OR 97301	(503) 945-6430
Rules Coordinator	Address	Telephone

RULE CAPTION

Tracheostomy Rule Amendment Requiring Additional Documentation

Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.

February 17 2015	10:30 a.m.	500 Summer St. NE, Salem, OR 97301 Room 166	Sandy Cafourek
Hearing Date	Time	Location	Hearings Officer

Auxiliary aids for persons with disabilities are available upon advance request.

RULEMAKING ACTION

Secure approval of new rule numbers (Adopted or Renumbered rules) with the Administrative Rules Unit prior to filing.

ADOPT:

AMEND: OAR 410-122-0209

REPEAL:

RENUMBER:

AMEND & RENUMBER:

Stat. Auth. : ORS 413.042 and 414.065

Other Auth.:

Stats. Implemented: ORS 414.065

RULE SUMMARY

Tracheostomy rule amended with additional documentation requirements.

The agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing the negative economic impact of the rule on business.

February 19, 2015 by 5 p.m. Send written comments to: dmap.rules@state.or.us

Last Day for Public Comment (Last day to submit written comments to the Rules Coordinator)


Signature

DAVID SIMMITT
Printed name

12/23/2014
Date

Note: Hearing Notices must be submitted by the 15th day of the month to be published in the next month's *Oregon Bulletin*.

Secretary of State
STATEMENT OF NEED AND FISCAL IMPACT

A Notice of Proposed Rulemaking Hearing or a Notice of Proposed Rulemaking accompanies this form.

Oregon Health Authority, Division of Medical Assistance Programs (Division)
Agency and Division

410

Administrative Rules Chapter Number

Tracheostomy Rule Amendment Requiring Additional Documentation

Rule Caption (Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.)

In the Matter of: The amending of OAR 410-122-0209

Statutory Authority: ORS 413.042 and 414.065

Other Authority:

Stats. Implemented: ORS 414.065

Need for the Rule(s): Rule language amended with additional documentation requirements.

Documents Relied Upon, and where they are available: N/A

Fiscal and Economic Impact:

-No fiscal impact is anticipated as there is no policy change associated with this rule amendment.

Statement of Cost of Compliance:

1. Impact on state agencies, units of local government and the public (ORS 183.335(2)(b)(E)): No impact in the implementation of these amendments.
2. Cost of compliance effect on small business (ORS 183.336):
 - a. Estimate the number of small businesses and types of business and industries with small businesses subject to the rule:
No small businesses affected by this rule amendment.
 - b. Projected reporting, recordkeeping and other administrative activities required for compliance, including costs of professional services:
No administrative costs expected with this rule amendment.
 - c. Equipment, supplies, labor and increased administration required for compliance:
No increased or decreased costs to small businesses for compliance.

How were small businesses involved in the development of this rule? DMEPOS stakeholders were advised in stakeholder meetings held on June 5, 2014

Administrative Rule Advisory Committee consulted?: Yes. Rule Advisory Committee meeting was held on June 6, 2014 with no additional comments or feedback regarding the rule amendments.

If not, why?:



Signature

DAVID SUMMITT

Printed name

12/23/2014

Date

Administrative Rules Unit, Archives Division, Secretary of State, 800 Summer Street NE, Salem, Oregon 97310.

410-122-0209

Tracheostomy Care Supplies

(1) Indications and Coverage: For a client following an open surgical tracheostomy ~~which~~that has been open or is expected to remain open for at least three months;:-

(a) -Standard tracheostomy supplies, including tracheostomy tubes (A7520, A7521), do not require prior authorization;:-

(b) Custom/Specialized tracheostomy tubes must be a device that requires the manufacturer to complete substantive customization or modification for a specific individual's medical need;

(c) Custom/Specialized tracheostomy tubes require prior authorization and shall be approved with clinical documentation supporting the medical appropriateness and a statement from the prescribing practitioner explaining why a standard or off-the-shelf tracheostomy tube will not meet the client's medical needs.

(2) Documentation:

(a) A prescription for tracheal equipment ~~which~~that is signed by the prescribing practitioner ~~must~~shall be kept on file by the DMEPOS provider. The prescribing practitioner's records ~~must~~shall contain information ~~which~~that supports the medical appropriateness of the item ordered;:-

(b) Custom/Specialized tracheostomy tubes require an assessment every six months indicating a standard tracheostomy tube does not currently meet the medical needs of the client. Documentation shall be submitted to the Division at the time of request.

(3) Billing:

(a) Custom/Specialized tracheostomy tubes shall be billed using the correct HCPCS code and modifier 22;

(b) Custom/Specialized tracheostomy tubes shall be reimbursed following the payment methodology outlined in OAR 410-122-0186 for manually priced items.

(3)(4) Procedure Codes – Table 122-0209.

Statutory Authority: ORS 413.042 and 414.065

Statutes Implemented: ORS 414.065

For the code legend see OAR 410-122-0182.

Code	Description	PA	PC	RT	MR	RP	NF
A4481	Tracheostomy filter, any type, any size, each		PC				
A4483	Moisture exchanger, disposable		PC				
A4623	Tracheostomy, inner cannula		PC				
A4625	Tracheostomy care kit for new tracheostomy Contains one plastic tray, one basin, one pair of sterile gloves, tube brush, three pipe cleaners, one pre-cut tracheostomy dressing, one roll of gauze, four 4x4 sponges, two cotton tip applicators, 30" twill tape One tracheostomy care kit per day is covered for two weeks following an open surgical tracheostomy		PC				
A4626	Tracheostomy cleaning brush, each		PC				
A4629	Tracheostomy care kit for established tracheostomy Contains one tube brush, two pipe cleaners, two cotton tip applicators, 30" twill tape, two 4x4 sponges One tracheostomy care kit per day is considered necessary for routine care of a tracheostomy, starting with post-operative day 15		PC				
A7501	Tracheostoma valve, including diaphragm, each		PC				
A7502	Replacement diaphragm/faceplate for tracheostoma valve, each		PC				
A7503	Filter holder or filter cap, reusable, for use in a tracheostoma heat and moisture exchange system, each		PC				
A7504	Filter for use in a tracheostoma heat and moisture exchange system, each		PC				
A7505	Housing, reusable without adhesive, for use in a heat and moisture exchange system and/or with a tracheostoma valve, each		PC				
A7506	Adhesive disc for use in a heat and moisture exchange system and/or with		PC				

For the code legend see OAR 410-122-0182.

Code	Description	PA	PC	RT	MR	RP	NF
	tracheostoma valve, any type, each						
A7507	Filter holder and integrated filter without adhesive, for use in a tracheostoma heat and moisture exchange system, each		PC				
A7508	Housing and integrated adhesive, for use in a tracheostoma heat and moisture exchange system and/or with a tracheostoma valve, each		PC				
A7509	Filter holder and integrated filter housing, and adhesive, for use as a tracheostoma heat and moisture exchange system, each		PC				
A7520	Tracheostomy/laryngectomy tube, non-cuffed, polyvinylchloride (PVC), silicone or equal, each		PC				
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A7520	*Custom/Specialized tracheostomy/laryngectomy tube, non-cuffed, polyvinylchloride (PVC), silicone or equal, each	PA	PC				
A7521	Tracheostomy/laryngectomy tube, cuffed, polyvinylchloride (PVC), silicone or equal, each		PC				
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A7521	*Custom/Specialized tracheostomy/laryngectomy tube, cuffed, polyvinylchloride (PVC), silicone or equal, each	PA	PC				
A7522	Tracheostomy/laryngectomy tube, stainless steel or equal (sterilizable and reusable), each		PC				
A7524	Tracheostoma stent/stud/button, each		PC				
A7525	Tracheostomy mask, each		PC				
A7526	Tracheostomy tube/collar, each		PC				
A7527	Tracheostomy/laryngectomy tube plug/stop, each		PC				
S8189	Tracheostomy supply, not otherwise classified	PA	PC				