

**April 22, 2020**

## **COVID-19 Changes for Durable Medical Equipment and Supplies**

Due to the [COVID-19 Public Health Emergency](#), Vermont Medicaid is taking steps to ensure Vermonters have access to necessary care and that health care professionals can deliver that care in a safe and timely way.

Listed below are changes in policy and practices for durable medical equipment and supplies that the Department of Vermont Health Access is implementing for the duration of the COVID-19 public health emergency.

These are temporary measures. DVHA will continue to review policies and procedures during the COVID-19 emergency.

Provider communications related to changes in effect through the duration of the public health emergency can be found on the DVHA [COVID-19 page](#) and [Vermont's Global Commitment Register Policy Clarifications](#).

### Breast Pump Coverage

- The clinical coverage criteria for breast pumps has been amended to include coverage for mothers exposed to or infected with COVID-19. This applies to personal and hospital grade breast pumps.
- Hospitals and OBGYNs are encouraged to write the prescription before the mother is released from the hospital to expedite the process of obtaining breast pumps.

### Short-term Oxygen

- Vermont Medicaid is waiving the requirement for a beneficiary to be in a chronic stable condition in order to receive home-based oxygen.

### Prior Authorization Changes

- Waive prior authorization requirements
  - DVHA is waiving prior authorization requirements for durable medical equipment and supplies. This includes continuous glucose monitors obtained from a pharmacy.
  - Prior authorization remains in place for items with the potential to cause imminent harm.
  - Prior authorization for excess quantity limits will be waived when medical necessity is met.
- Extend pre-existing prior authorizations



- DVHA has extended approved prior authorizations for certain clinical services set to exhaust in April for an additional six months. No additions or changes to services or units may be made.
- DVHA will continue to evaluate the need to extend prior authorizations for clinical services and drugs approved prior to the COVID-19 public health emergency. The original approval period may be extended for these services.

#### Face-to-face Requirements and Telemedicine

- If telemedicine (two-way, real-time, audio and video interactive communication) is not possible for the initiation of DME, Medicaid providers may furnish services by telephone, when medically necessary and clinically appropriate, during the public health emergency.

#### Telemedicine for Complex Rehab Wheelchairs and Accessories.

- Physical and Occupational Therapists and Assistive Technologists may utilize telemedicine, when the service is clinically appropriate for telemedicine, in order to evaluate, prescribe, and fit complex re/habilitation equipment.

#### Waive Signature and Proof of Delivery Requirements

- Signature and proof of delivery for durable medical equipment may be waived when a signature cannot be obtained because of the inability to collect signatures. Suppliers should document in the medical record the appropriate date of delivery and that a signature was not able to be obtained because of COVID-19.

#### Suspending Audits

- DVHA has put a hiatus on all audits while there is an emergency situation in place, and this hiatus will remain in place through there emergency situation.

#### Expedited Provider Enrollment

- Providers must still enroll, DVHA will not allow providers who are not enrolled to order DMEPOS.
- Providers can enroll in an expedited way <https://vermont.hppcloud.com/Home/Index/>  
DVHA has taken the following steps to expedite provider enrollment:
  1. Temporarily waiving provider enrollment requirements to ensure a sufficient number of providers are available to serve Medicaid enrollees. Such requirements include the payment of application fees, criminal background checks, or site visits.
  2. Temporarily cease the revalidation of providers who are located in- state or otherwise directly impacted by a disaster.
  3. Temporarily waive requirements that physicians and other health care professionals be licensed in the state or territory in which they are providing services, so long as they have equivalent licensing in another state.

#### Delay Manual and Enhanced Pricing Changes for DMEPOS

- The rate reductions scheduled for 7/1/2020 will be postponed until Medicaid's regular DMEPOS fee schedule update scheduled for 1/1/2021. This includes the planned change in methodology for manually priced codes as well as the planned rate reductions for the set of frequently billed codes for which DVHA put rates on file effective January 1, 2020.