

Durable Medical Equipment / Supplies
Allowed by SWHP To Be Distributed by Practitioner's Offices

The following list includes items of durable medical equipment (DME) and/or related medical supplies that may be provided by a Scott & White Health Plan (SWHP)-approved Practitioner's office **without prior approval of the SWHP Health Services Division**. The claims for these items should be submitted directly to SWHP Claims Department and will be adjudicated (processed) against the Member's benefit for DME under the terms of their Evidence of Coverage (EOC)/Standard Plan Document (SPD).

*This is for Commercial and Self-Insured Group Members with defined DME benefits and **not** SeniorCare Members. SeniorCare Members must follow first the traditional Medicare rules of coverage before SWHP SeniorCare will provide any coverage according to their EOC. **The Practitioner is responsible for determining the Medicare coverage status prior to providing any of the approved items and billing the Plan.** SWHP will provide coverage under the terms of the SeniorCare Member's EOC for Medicare-approved items for separate billing from the E&M Code if the item is on SWHP's approved list attached and according to the Practitioner's fee schedules with SWHP for these items. Supplies/items less than \$25 are not covered by SWHP. (Please refer to your contract with SWHP for details.)*

NOTE: If a Member's benefit is exhausted and/or there is no benefit, the claim will be denied as appropriate. An explanation of benefits with the reason for the denial and the Member's appeal rights will be generated by the Claims system and sent to the Member/Practitioner. The Practitioner will be responsible for the collection of any money from the Member that may be owed for the item(s). ***It is ultimately the Member's responsibility to know the terms and limitations of their EOC/SPD and how much of their benefit they may have used in a contract year.***

This policy has been in effect since 5/1/99 and reviewed/updated as of 6/1/10. The Health Services Division (HSD) will not process routine requests by Practitioners/Providers for these items. Routine case requests will be returned to the requesting party with a cover memo indicating that the processing will not be completed, as these items do not require prior authorization through HSD. If a Practitioner is requesting a non-routine coverage determination (i.e., out-of-contract due to benefit exhaustion; etc.) due to an extenuating circumstance for a Member, it must clearly be delineated on the required SWHP Authorization Form to note that it is not a routine request and justification must be provided for the request.

For questions/clarifications regarding the policy, please contact SWHP Provider Relations at 254-298-3064 or the Health Services Division at 254-298-3088 (or toll free at 888-316-7947).

**SWHP-APPROVED DME/SUPPLIES FOR DISTRIBUTION
BY PRACTITIONER OFFICES**

Code	Description
A 4561	Pessary, rubber, any type
A 4562	Pessary, non-rubber, any type
E 0112	Crutches, underarm, wood, adjustable or fixed, pair, with pads, tips and handgrips
E 0113	Crutches, underarm, wood, adjustable or fixed, each, with pads, tips and handgrips
E 0114	Crutches, underarm, other than wood, adjustable or fixed, pair, with pads, tips and handgrips
E 0116	Crutches, underarm, other than wood, adjustable or fixed, each, with pads, tips and handgrips
L 0120	Cervical, flexible, nonadjustable (foam collar)
L 0210	Thoracic, rib belt
L 1620	HO, abduction control of hip joints, flexible, (Pavlik harness), prefabricated, includes fitting and adjustment
L 1830	KO, immobilizer, canvas longitudinal, prefabricated, includes fitting and adjustment (knee immobilizer)
L 3650	SO, figure of eight design abduction re-strainer, prefabricated, includes fitting and adjustment
L 3807	WHFO, without joint(s), prefabricated, includes fitting and adjustments, any type
L 3908	WHO, wrist extension control cock-up, non-molded, prefabricated, includes fitting and adjustment
L 4350	Ankle control orthosis, stirrup style, rigid, includes any type interface (e.g., pneumatic, gel), prefabricated, includes fitting and adjustment
L 4386	Walking boot, non-pneumatic, with or without joints, with or without interface material, prefabricated, includes fitting and adjustment

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