

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT201640    JULY 19, 2016

## IHCP to cover custom tracheostomy tubes

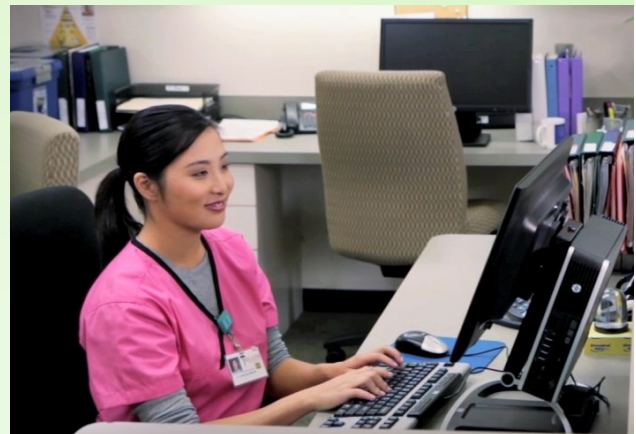
The Indiana Health Coverage Programs (IHCP) currently covers standard tracheostomy tubes. Effective August 19, 2016, the IHCP will add coverage for custom tracheostomy tubes, using Current Procedural Terminology (CPT<sup>®1</sup>) code S8189 – *Tracheostomy supply, not otherwise classified*. A custom tracheostomy tube is a device on which the manufacturer is required to make substantive customization or modification to meet a specific member's medical needs. Coverage applies to all IHCP programs, subject to limitations established for certain benefit packages. Coverage applies to dates of service (DOS) on or after August 19, 2016.

The following information applies for reimbursement:

**Pricing:** Manually priced.

**Prior authorization (PA):** PA is required. Authorization of custom tracheostomy tubes requires 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 member's medical needs.

**Billing guidance:** A cost invoice must be submitted with the claim; standard billing guidelines apply. See the [Claim Submission and Processing](#), [Durable and Home Medical Equipment and Supplies](#), or other relevant service-specific provider reference modules at [indianamedicaid.com](http://indianamedicaid.com) for billing procedures.



These changes will be reflected in the next monthly update to the [Fee Schedule](#) at [indianamedicaid.com](http://indianamedicaid.com). This code will be added to the appropriate *Durable and Home Medical Equipment and Supplies* code table and to the *Procedure Codes that Require Attachments* code table on the [Code Sets](#) page at [indianamedicaid.com](http://indianamedicaid.com).

Reimbursement, PA, and billing information apply to services delivered under the fee-for-service (FFS) delivery system. Questions about FFS PA should be directed to Cooperative Managed Care Services (CMCS) at 1-800-269-5720. Individual managed care entities (MCEs) establish and publish reimbursement, PA, and billing information within the managed care delivery system. Questions about managed care billing and PA should be directed to the MCE with which the member is enrolled.

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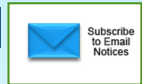
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