ELDERLY SERVICES PROGRAM (ESPSM)

HOME MEDICAL EQUIPMENT

SERVICE SPECIFICATIONS

2008

EFFECTIVE JANUARY 2008 (BCESP) (CCESP) EFFECTIVE FEBRUARY 2008 (HCESP)

HOME MEDICAL EQUIPMENT

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HOME MEDICAL EQUIPMENT SERVICE SPECIFICATIONS

1.0 OBJECTIVE

Home Medical Equipment (HME) promotes functional independence and/or safe effective in-home care through the provision of health-related equipment. Home Medical Equipment under the Elderly Services Program (ESP) is limited to items not covered by third-party payors, Medicare or the state Medicaid plan.

2.0 UNIT OF SERVICE

- 2.1 A unit of service is the item purchased or rented.
- 2.2 The unit rate is the purchase or rental price accepted by the Care/Case Manager for the item. Rental amount, over time, is not to exceed the value of the item.
- 2.3 Purchase of HME is limited to a lifetime maximum of \$1,000 per client.

3.0 PROVIDER REQUIREMENTS

- 3.1 The Provider must bill Medicare/Medicaid or any third-party payor for reimbursable items referred by the Care/Case Manager and ordered by the physician.
- 3.2 The Provider may only bill for the original price quote submitted to and approved by the Care/Case Manager, unless a cost revision has been previously authorized by the Care/Case Manager.
- 3.3 The Provider must furnish professional ongoing assistance when needed to evaluate and adjust products delivered, or to instruct clients/caregivers in the use of HME products and assembly as applicable.
 - (a) The Provider must assume liability for equipment warranties and, therefore, install, maintain, and/or replace any defective parts or items, as specified in appropriate warranties.
 - (b) Replacement items or parts for rented equipment will not be reimbursed if damage is not related to normal wear and tear.
 - (c) The provider will notify Care/Case Manager of expected date of repair or replacement.
- 3.4 The Provider must maintain individual client records documenting delivery and/or common carrier shipping record, installation of equipment, and instruction in use of equipment, when applicable.
- 3.5 The Provider may not bill until after delivery of the HME.