



October 25, 2013

Montana Health Care Programs Notice

Durable Medical Equipment

Mail Order Diabetic Testing Supplies

The HCPCS modifier “KL” will need to be used for all diabetic testing supply codes that are shipped or delivered to Medicaid members via mail order. The term “mail order” means items shipped or delivered to the recipient’s residence regardless of the method of delivery. This policy is due to Round 2 of the national mail order competitive bidding program for diabetic testing supplies which became effective on July 1, 2013.

The KL modifier should not be used to bill the Department for items that a recipient or caregiver picks up in person from a local pharmacy or supplier storefront as it will result in a reduced reimbursement.

Relative information regarding claims modifiers for use in the Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Bidding Program can be found in the MLN Matters Number SE1035 at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/SE1035.pdf>

In accordance with the Administrative Rules of Montana, 37.86.1802, Montana Medicaid has adopted Medicare coverage criteria for Medicare covered durable medical equipment as outlined in the Region D Supplier Manual, local coverage determinations (LCDs) and national coverage determinations (NCDs). For prosthetic devices, durable medical equipment, and medical supplies not covered by Medicare coverage will be determined by the Department.

Contact Information

If you have any questions, please contact Donna Shorten at 406.444.5296 or DShorten@mt.gov.

For claims questions or additional information, contact Provider Relations at 1.800.624.3958 (toll-free, in/out of state) or 406.442.1837 (Helena) or via e-mail at MTPRHelpdesk@xerox.com.

Visit the Provider Information website at <http://medicaidprovider.hhs.mt.gov>.