







# Wheelchair Repairs The Good, the Bad and the Ugly











# Session Objectives



- Understand the initial considerations for timely and accurate Wheelchair Repairs (repair / replacement)
- Review the documentation requirements for repairs (medical necessity, continued need/use) to ensure compliance
- Discuss audits expectation from various auditors to ensure compliance









## Wheelchair Repairs - The Good, the Bad and the Ugly

- The Good Suppliers wanting to repair their customers wheelchairs in a timely manner with as little out of pocket cost as possible
- The Bad Having to obtain documentation requirements PRIOR to doing the repair to ensure insurance payment when applicable
- The Ugly Being in the position of having to delay or deny repairing the wheelchair due to challenging documentation requirements for an item where medical necessity was already established AND Preparing for Post Pay Repair Audits









## Is it a Repair or a Replacement?

- To **REPAIR** means to **FIX** or mend and to put the equipment back in good condition after damage or wear. Repairs to equipment which a beneficiary owns are covered when necessary to make the equipment serviceable
- REPLACEMENT refers to the provision of an identical or nearly identical item. Equipment which the beneficiary owns or is a capped rental item may be replaced in cases of loss or irreparable damage. Irreparable damage refers to a specific accident or to a natural disaster (e.g., fire, flood, etc.)









Patient owned equipment

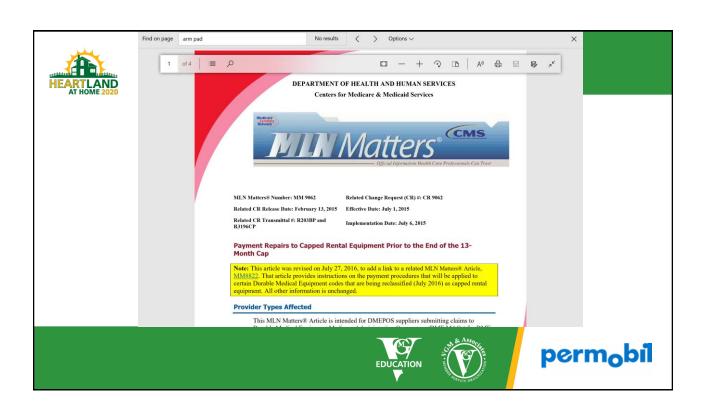


- Transfer of ownership before the full 13 months for capped rental items
- Parts and Labor NOT covered by manufacturer or supplier warranty
- Fix the "base" item by replacing a part that was included in the base item (code)
- Repair part is not initially billed separately as it is included in the description of another code (Basic Equipment Package – BEP)
- A wheelchair base (K0823) can be repaired











## Repair 😜

- Can't replace the entire base item (K0823) but CAN FIX it (a motor for example E2370)
- Repair to the base item (K0823) by replacing a part (E2370)
- Power-elevating/center mount power leg rests (E1012) are their **own base** because they are not part of a Basic Equipment Package of another item and are separately billable (on initial delivery)
- A power tilt is its own base code (E1002) and has components that could be replaced to FIX the tilt









- Any item that is NOT included in the description of another code (allowable) is its OWN "base"
- A "base" item can be repaired, but a base item cannot be <u>replaced</u> for five years due to the required five-year reasonable useful life (5-year RUL)
- Labor (K0739) is reimbursed for a repair (no modifiers on K0739) one unit = 15 min
- Cumulative repairs are paid up to the cost of replacement during the 5-year RUL
- If the expense for repairs exceeds the estimated expense of purchasing or renting another item of
  equipment for the remaining period of medical need, no payment can be made for the excess
  amount











- Cumulative repairs are paid up to the cost of replacement during the 5-year RUL
  - Repairs to a power wheelchair single power option base (K0856) = Parts + Labor + Temporary Replacement Equipment (AKA Loaner)
  - o Labor must be itemized per PART
  - o Remember EACH separately billed item is its OWN base
  - Repairs to a tile (E1002) do NOT count toward the cumulative costs to the power base (K0856)









- How to calculate the allowable for repairs
- Capped Rental (CR) Items
  - o RR rate x 10
- Inexpensive or routinely purchased items (IRP)
  - o NU rate if new or UE rate if used
- Motor example on a group 3 base in Idaho E2370 RR rate \$80.40
- ALL repairs are paid as a lump sum (purchase)  $$80.40 \times 10 = $804.00$
- Modifiers E2370 NURBKUKX = \$804.00 each
- REMINDER: KU modifier is eligible for CRT MWC beginning July 6, 2020



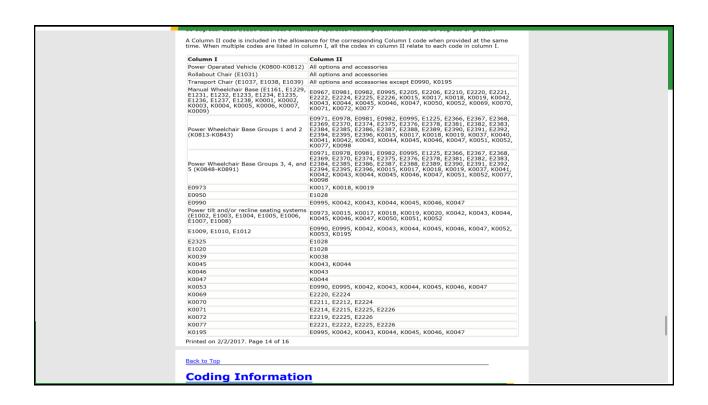






- To determine if something is part of another item (BEP), use the Wheelchair Options Policy Article on page 14
- If an item in column II is being replaced on an item in column I, then it is a repair and the RB
  modifier would be used
- Batteries on a power wheelchair are the EXCEPTION as they are considered a REPAIR (RB mod)
- Detachable Height Adjustable Armrests (E0973) Their OWN base on all wheelchairs EXCEPT if Power Positioning is used as E0973 IS included in BEP for Power Positioning (E1002-E1008)
- Can fix (repair) those column I codes but cannot replace the entire code for five years unless....









- Labor (skill of a technician) not covered by a manufacture warranty
- Must document the time to perform the labor (itemized per part)
- Non warranty labor is covered even if the part is covered under warranty
- Labor is paid at 1 unit = 15 minutes (document minutes and units rounding up)
- Some common repairs have an established (set) units of labor
- Travel time, equipment pick up and or delivery doesn't count as labor time
- Service call fees cannot be charged to the patient







#### Repair Labor Billing and Payment Policy



The following table contains repair units of service allowances for commonly repaired items billed under HCPCS code K0739 (Repair or Nonroutine Service for Durable Medical Equipment Other than Oxygen Equipment Requiring the Skill of a Technician, Labor Component, Per 15 Minutes). This applies to non-rented and out-of-warranty items. Units of service include basic troubleshooting and problem diagnosis. One unit of service = 15 minutes, Please note that there is no Medicare payment for travel time or equipment pick-up and/or delivery.

Type of Equipment	Part Being Repaired/Replaced	Allowed Units of Service (UOS)
Power Wheelchair	Batteries (includes cleaning and testing)	2
Power Wheelchair	Joystick (includes programming)	2
Power Wheelchair	Charger	2
Power Wheelchair	Drive wheel motors (single/pair)	2/3
Power Wheelchair	Shroud/Cowling	2
Power or Manual Wheelchair	Armrest or armpad	1
Power or Manual Wheelchair	Wheel/Tire (all types, per wheel)	1
Manual Wheelchair	Anti-tipping device	1

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#### Using the miscellaneous code for repairs (K0108)

- Use an appropriate HCPCS code for the part
  - Manufacturers should have appropriate code
- If there is no code for the description of the part, then use K0108
- MSRP, part number, description of part and "repair part" in narrative field
- Modifiers = NURBKX

Be sure to bill for labor – K0739 – One unit of service = 15 minutes (no modifiers)









- If <u>Medicare paid</u> for the base equipment initially, <u>medical necessity for the base equipment has been established</u>
- · Documentation from the original item is NOT required
- Standard Written Order is NOT required for a repair
- · Clinicians (treating practitioner, PT, OT, etc.) does NOT need to be involved for each repair
- Medicare contractors shall not require a face-to-face examination for repair of DMEPOS items already covered and paid for by Medicare









- Continued NEED IS required documented in the <u>medical record</u> within 12 months preceding the date of the repair
- Technician work order/ticket IS required with why repair is necessary (part, labor itemized per part)





## Repair

#### Medical Records

- The medical record is **not limited to treating physician/practitioner's office records but may include records from** hospitals, nursing facilities, home health agencies, other healthcare professionals, etc. (not all-inclusive)
- Records from suppliers or healthcare professionals with a financial interest in the claim outcome are not
  considered sufficient by themselves for determining that an item is reasonable and necessary
- Supplier-produced records, even if signed by the prescribing physician/practitioner, and attestation letters (e.g. letters of medical necessity) are deemed **not to be part of a medical record** for Medicare payment purposes
- Templates and forms, including CMS CMNs, are subject to corroboration with information in the medical record
- A prescription is not considered to be part of the medical record
- Medical information intended to demonstrate compliance with coverage criteria may be included on the prescription but **must be corroborated by information contained in the medical record**









## Replacement

- REPLACEMENT refers to the provision of an identical or nearly identical item. Equipment which the beneficiary owns or is a capped rental item may be replaced in cases of loss or irreparable damage. Irreparable damage refers to a specific accident or to a natural disaster (e.g., fire, flood, etc.)
- The entire base item CAN be replaced within 5 years IF loss due to
  - o Natural disaster (hurricane, tornado, tsunami, volcano, etc), OR
  - o Theft, fire, etc. (with official report) OR
  - o Irreparable damage due to a one-time incident / accident









## Replacement

The entire base item CAN be replaced within 5 years IF "LOSS" due to



- o Natural disaster (hurricane, tornado, tsunami, volcano, etc), OR
- Theft, fire, etc. (with official report) (NOT ABSUSE OR NEGLECT) OR



- Irreparable damage due to a one-time incident / accident
  - Power center mount ELR (E1012) Incident on June 24 irreparable damage due to hitting doorway with legrests
  - How often can E1012 be replaced within 5 years ONE TIME
  - o Training / programming for beneficiary safe use otherwise it's not covered









## Replacement

- RA Modifier MUST be used for REPLACEMENT within 5 years OR the base item will deny as frequency / same similar
- Narrative field MUST include the reason for the "LOSS"
- Natural Disaster Sometimes includes a CR mod as well with name of disaster in narrative "Hurricane Matthew"
- Theft, Fire include date and report number / case if applicable
- · Accident / Incident include date of occurrence and what happened
- Labor (K0739) is NOT covered for a REPLACEMENT (RA Mod)









## Temporary Replacement Equipment

- K0462 Temporary replacement DME (not just for mobility)
- Repair takes more than one day (24 hours) Item not safely operable
- Proof of the reason for repair taking over one day (manufacturer's order with delivery date)
- One month regardless if repair takes 2 days or 6 weeks
- Allowable based on item being repaired
- Provide a higher-level item is OK but not lower level item
- Must be billed on same claim as parts and labor if applicable









## Temporary Replacement Equipment

- Medicare allows payment for temporary replacement (HCPCS K0462) for beneficiary-owned equipment being repaired
- Claims must include a narrative description of the equipment being used as a temporary replacement, with the manufacturer, brand name, model name or number of the temporary replacement item
- A statement of why the replacement is needed
- Claims must include the HCPCS code and or manufacturer name, brand name, and model name or number of the beneficiary-owned piece of equipment and the date of purchase of the equipment









## **Contact Info**



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