

**Provider Notice 12-101**

Dear Provider,

Effective for dates of service on and after January 1, 2013, the Medicaid Program of the Health Care Authority (Agency) is publishing a revised [Respiratory Care Medicaid Provider Guide](#).

Specific changes to the coverage table in this guide include:

- Deleting codes K0741 and K0742 (oxygen and oxygen equipment codes), and code E0571 (nebulizers and accessories code).
- Adding new codes E0457 and E0459 (oxygen and oxygen equipment codes), and E0605 (continuous positive airway pressure system, or CPAP, code).
- Deleting Professional Services codes, reflecting current practice.
- Adding prior authorization to code S8189, Tracheostomy supply not otherwise classified.
- Clarifying respiratory coverage policy by replacing the “#” sign indicator throughout the coverage table with “NC” (service is not covered). These changes also are reflected in the updated fee schedule.

For more details, see the “What Has Changed” table in revised [Respiratory Care Medicaid Provider Guide Medicaid Provider Guide](#).

Viewing Fee Schedule Changes

To view the January 1, 2013 fee schedule, go to the Agency’s website online at: <http://hrsa.dshs.wa.gov/RBRVS/Index.html> and scroll down to Oxygen.

Note: [The updated fee schedule may not be available until January 1, 2013, so check the Agency’s website often until the fee schedule you are looking for appears.](#)

Thank you.

KS:AL
Provider Publications Team
Medicaid Program
Health Care Authority

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