

State of California—Health and Human Services Agency Department of Health Care Services



Edmond G. Brown Jr Governor

April 28, 2011

N.L.: 02-0411 Index: Benefits: Supersedes N.L. 12-1007 Supplements N.L. 13-1106

TO: ALL COUNTY CALIFORNIA CHILDREN'S SERVICES (CCS) ADMINISTRATORS, MEDICAL CONSULTANTS AND STATE CHILDREN'S MEDICAL SERVICES BRANCH AND REGIONAL OFFICE STAFF

SUBJECT: COCHLEAR IMPLANT BATTERIES AND PARTS

I. PURPOSE

Numbered Letters 13-1106 and 12-1007 provided policy to the CCS Independent County programs, Regional Offices, and CCS Dependent County programs for authorization of requests for cochlear implant speech processors, batteries and replacement parts. The purpose of this Numbered Letter is to update the policy and benefits delineated in those instructions.

II. BACKGROUND

In 2007, two cochlear implant manufacturers were enlisted by Medi-Cal to provide replacement parts and batteries directly to the patient. However, it is necessary for the Cochlear Implant Centers to determine how best to use this delivery option. Because not all of the implant manufacturers are registered as Medi-Cal DME providers, there are circumstances in which the Cochlear Implant Center may request the authorization for batteries and replacement parts for their own distribution.

The manufacturers and approved cochlear implant providers that can receive authorizations for replacement parts and batteries include:

- Advanced Bionics Corporation, 1841479573
- Cochlear Americas, 1336149426
- UC Davis Medical Center, 1710918545

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- Ronald Reagan UCLA Medical Center, 1902803315
- Children's Hospital Oakland, 1003961251
- Rady's Children's Hospital, 1710065933
- House Ear Institute, 1407981129
- Stanford Cochlear Implant Center, 1871543215
- UCI Medical Center, 1689608150
- UCSF Medical Center, 1457450116

Due to changes in technology and the Healthcare Procedure Coding System (HCPCS), policy and frequency limits have been modified. There may be cases where older technology or more powerful technology requires more batteries or replacement parts; this should be considered adequate justification for additional units requested by the Cochlear Implant Centers.

III. POLICY

- A. Requests for all cochlear implant evaluations and surgeries must be forwarded to the State Audiology Consultant as instructed by N.L. 09-1208 and criteria for the authorization of speech processor upgrades is delineated for county authorization in N.L. 13-1106.
- B. Replacements parts, batteries and speech processor upgrade authorizations must be requested by the Cochlear Implant Centers. The authorization must be issued to the approved Cochlear Implant Center or the cochlear implant manufacturer requested by the Cochlear Implant Center staff. The SCG 05 issued to the Cochlear Implant Centers includes limited batteries for the provider to issue with the appointment. Therefore, it may be necessary for authorizations to be issued to both the Cochlear Implant Center and the manufacturer, as long as the total number of units does not exceed the benefits listed below, or if justification for the additional parts and batteries is included with the request.
- C. L8619 (external speech processor and controller, integrated system), L8627 (external speech processor, replacement) and L8628 (external controller component, replacement), may be authorized at the request of the Cochlear Implant Center to either the Center or the manufacturer if the component is lost, irreparably damaged, beyond the useful lifetime of 5 years, or accompanied with medical justification. See N.L. 13-1106 for clarification regarding replacement criteria. The approved component may be added to a current authorization for cochlear implant replacement parts and batteries, or can be requested as a separate authorization.

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- D. Frequency limitations will be implemented on the Service Authorization Request (SAR) and may be renewed annually at the time of the new program eligibility date. Frequency limitations below are based on one unilateral cochlear implantation and should be doubled for bilateral cochlear implantation. Additional parts beyond the frequency limitations require medical justification from the Cochlear Implant Center providing post-surgical care. Additional units may not be authorized based on a request from the parents, guardians, or the cochlear implant manufacturer. The Cochlear Implant Replacement Parts and Batteries Request Form delineates the the number of parts that should be authorized for each HCPCS code.
- E. Requests, repairs (L7510) and unlisted replacement parts (L9900) beyond the annual \$400 maximum allowable rate will require a request initiated by the Cochlear Implant Center of Excellence. The repair or additional units of the unlisted replacement parts can be added to a current authorization for cochlear implant replacement parts and batteries, or can be approved as a separate authorization.

IV. IMPLEMENTATION

- A. The Cochlear Implant Center will submit the Established CCS/GHPP Client Service Authorization Request (SAR) and/or the *Cochlear Implant Replacement Parts and Batteries Request Form,* indicating the HCPCS codes and units in Requested Services and, if using the cochlear implant manufacturer, the name and NPI of the manufacturer in box 30 of the SAR. The number of units requested should not exceed the frequency limitation units indicated on the Cochlear Implant Replacement Parts and Batteries Request Form, unless medical justification has been provided (i.e., older technology, higher battery drain).
- B. The authorization for the batteries may be a combination of 300 disposable (L8621/L8622) and 2 rechargeable (L8623/L8624), per implant, if requested by the Cochlear Implant Centers.
- C. The authorization should remain a "97" SAR, with the EPSDT box unchecked on the SAR, regardless of program eligibility. **No modifiers should be used with any "L" codes for cochlear implant replacement parts and batteries.**

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The CMS Branch will continue to monitor developments in cochlear implant technology and will update criteria for the authorization of implant technology and services as appropriate.

Should you have any questions regarding the authorization of cochlear implant services, please contact the CCS Branch Audiology Consultant, at (916) 323-8100.

Thank you for your services to California's children.

Original Signed by Robert Dimand

Robert Dimand, M.D. Chief Medical Officer Children's Medical Services

cc: V. David Banda, Acting Chief Hearing and Audiology Services Unit Children's Medical Service Branch Children's Medical Service Branch 1515 K Street, Suite 400 Sacramento, CA 95814

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Cochlear Implant Replacement Parts and Batteries Request Form

CCS #: _ County:	Date of Request:	
Child's Name:	Date of Birth:	
Cochlear Implant Center:		

Cochlear Implant Manufacturer:

Units below are per implant and may be doubled for bilateral implant users. Batteries may be a combination of the disposable (L8621/L8622) and rechargeable (L8623/L8624) of 300 disposable and 2 rechargeable, per implant.

Service	Description	Number of Units
Code		
L8615	Headpiece	1
L8616	Microphone	2
L8617	Transmitting coil	1
L8618	Transmitter cable	2
L8621	Zinc air batteries	600
L8622	Alkaline batteries	600
L8623	Lithium ion batteries	4
L8624	Lithium ion batteries for ear level speech processor	4
L8629	Transmitting coil and cable, integrated	2
L9900	Unlisted cochlear implant accessories: earhooks, magnets, chargers, harnesses, etc.	Up to \$400/year
L8619	Speech processor and controller replacement, integrated system	1 every 5 years Lost or damaged
L8627	Speech processor, replacement	1 every 5 years Lost or damaged
L8628	External controller component	1 every 5 years Lost or damaged
L7510	Repair of prosthetic device	As needed

Explanation of additional codes/units requested:

Provider Signature: