



State of New Mexico
 Medical Assistance Program Manual
Supplement



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TO: ALL LONG-TERM AND SKILLED NURSING FACILITIES PARTICIPATING IN THE NEW MEXICO MEDICAID PROGRAM

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THROUGH: ANNABELLE MARTINEZ, BUREAU CHIEF, BENEFITS AND REIMBURSEMENT BUREAU
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SUBJECT: VENTILATOR SERVICE ADD-ON CRITERIA, PROCEDURE CODE AND REIMBURSEMENT RATE

The New Mexico Human Services Department (HSD), Medical Assistance Division (MAD) is issuing this Supplement to implement an add-on rate for ventilator services provided in long-term and skilled nursing facilities in New Mexico authorized under State Plan Amendment (SPA) 22-0012 Nursing Facility (NF) Ventilator Services. The services will enable Medicaid recipients to remain in New Mexico, reduce out-of-state family travel burden and allow for better member care coordination.

1. Effective for dates of service on and after March 14, 2022, the nursing facility per diem add-on for a ventilator dependent resident will be \$305.66.
2. The per diem costs of providing services to the ventilator dependent residents shall be maintained separately (as a distinct part) of each facility’s annual cost report beginning March 14, 2022.
3. Ventilator dependent per diem add-on rates will cover all skilled nursing care services and will be all-inclusive.
4. The resident’s clinical condition shall be reviewed every 90 days to determine if the resident’s medical condition continues to warrant services at the ventilator dependent nursing facility rate. If a resident no longer requires use of a ventilator, the provider shall not receive additional reimbursement beyond the New Mexico Medicaid nursing home per diem rate determined for the facility.

Long-term and skilled nursing facilities in New Mexico must be certified by the Department of Health (DOH) to provide ventilator services.

Clinical Criteria for Vent Wing:

1. Have a health condition that requires close medical supervision defined as 24 hours a day of licensed nursing care along with specialized services or equipment;
2. Require mechanical ventilation greater than or equal to six hours a day;

3. Have tracheostomy (with daily care) and require mechanical ventilation for a portion of each day for stabilization;
4. Require continuous pulse oximetry monitoring to check the stability of oxygen saturation levels;
5. Require respiratory assessment and daily documentation by a licensed respiratory therapist or registered nurse;
6. Have a provider’s order for respiratory care to include suctioning as needed;
7. Have tracheostomy care with suctioning and room air mist or oxygen as needed, and one of the four treatment procedures listed below:
 - Total parenteral nutrition;
 - Inpatient physical, occupational, and/or speech therapy;
 - Tube feeding (nasogastric or gastrostomy); or
 - Inhalation therapy treatments every shift and a minimum of four times per 24-hour period.
8. The recipient’s diagnosis must be consistent with ICD diagnosis codes for ventilator dependency;
9. The skilled nursing facility must be approved for ventilator care;
10. Providers must be specially trained and competent in respiratory and vent care.

Vent Wing Procedure Codes, Diagnosis Code and Rates:

Long-term and skilled nursing facilities in New Mexico that provide ventilator services that meet the clinical criteria can bill the add-on service with the following claim information:

Provider Type	Code	Description	Rate	Effective Date
211 or 212	Revenue Code 0947	Other therapeutic svcs-complex medical equipment ancillary	\$305.66	March 14, 2022

Append CPT 94004-Nursing facility ventilation assistance and management to revenue code on above table.

The claim must also reflect an ICD 10 Diagnosis code of Z99.11- Dependence on respirator (ventilator) status.

These changes are applicable to both Fee-For-Service and the Managed Care Organizations (MCOs).

HSD will update 8.312.2 NMAC to reflect these changes.

If you have questions regarding this Supplement, please contact Jeannette Gurule at Jeannette.C.Gurule@hsd.nm.gov.