



Health & Human Services

TRACH CARE KITS

Service Authorization Required: No

CMN Required: No

DURABLE MEDICAL EQUIPMENT MANUAL

COVERAGE AND LIMITATION CRITERIA AND POLICIES

EFFECTIVE: March 2007

REVISED: December 2023

TRACH CARE KITS

Indications and limitations of coverage and medical appropriateness:

Coverage allowed if the following conditions are present:

- Following an open surgical tracheotomy, which has been left open or is expected to remain open for at least three months.
- Trach care kits provided in the first two postoperative weeks should be coded as **A4625**.
- Trach care kits provided **after** the first two postoperative weeks should be coded as **A4629**.
- One tracheotomy care kit allowed per day.
- **A7527** (Tracheostomy/laryngectomy tube plug/stop) is used as an alternative to a tracheostomy/laryngectomy tube and therefore for a member receiving **A7527** claims for **A7520, A7521 and A7522** will be denied as not reasonable or necessary.

Documentation Requirements:

- A prescription from prescribing physician/practitioner.
- Medical documentation supporting the need.
- Physician/practitioner exam within 90 days of the service authorization start date.



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Date Revised

Revisions

July 2017

Reviewed and Reformatted, added clarification on when an A7527 will be covered.

January 3, 2020

Reviewed. Added new Department log and replaced 60 days with 90 days.

November 23, 2023

Reviewed and unchanged. Header updated with new logo.