

**WAC 182-552-1350 Limitation extension (LE).** (1) The medicaid agency limits the amount, frequency, or duration of certain covered respiratory care, and reimburses up to the stated limit without requiring prior authorization.

(2) Certain covered items have limitations on quantity and frequency. These limits are designed to avoid the need for prior authorization for items normally considered medically necessary and for quantities sufficient for a thirty-day supply for one client.

(3) The medicaid agency requires a provider to request prior authorization for a limitation extension (LE) in order to exceed the stated limits for respiratory care. All requests for prior authorization must be accompanied by a completed General Information for Authorization form (HCA 13-835) in addition to any program specific medicaid agency forms as required within this chapter. Agency forms are available online at <http://hrsa.dshs.wa.gov/mpforms.shtml>.

(4) The medicaid agency evaluates such requests for LE under the provisions of WAC 182-501-0169.

[Statutory Authority: RCW 41.05.021. WSR 12-14-022, § 182-552-1350, filed 6/25/12, effective 8/1/12.]