

**WAC 182-552-0900 Respiratory care—Covered—Oximeters.** (1) The medicaid agency covers the purchase of oximeters for clients eighteen years of age and older with prior authorization as follows:

- (a) One standard oximeter, per client, every twenty-four months;
- or
- (b) One enhanced oximeter, per client, every thirty-six months.
- (2) The medicaid agency covers the purchase of oximeters for clients seventeen years of age and younger, in the home, as follows:
- (a) When the client meets one of the following clinical criteria:
    - (i) Has chronic lung disease and is on supplemental oxygen;
    - (ii) Has a compromised or artificial airway; or
    - (iii) Has chronic lung disease requiring ventilator or bi-level respiratory assist device; and
  - (b) The following limitations apply:
    - (i) One standard oximeter, per client, every twenty-four months, without prior authorization; or
    - (ii) One enhanced oximeter, per client, every thirty-six months, with expedited prior authorization.
- (3) The medicaid agency pays for replacement supplies as follows:
- (a) Cables for enhanced oximeter only, limited to two per client per year. Prior authorization (PA) is required.
  - (b) Probes.
    - (i) Nondisposable, limited to one per client every one hundred eighty days.
    - (ii) Disposable, limited to four per client every thirty days.

[Statutory Authority: RCW 41.05.021. WSR 12-14-022, § 182-552-0900, filed 6/25/12, effective 8/1/12.]