

# **PULMONARY PROVIDERS GROUP, INC.**

**4330 N. CALIFORNIA AVE # A CHICAGO, IL 60618**

**OFFICE: (847) 824 - 0500**

**24 HOUR SERVICE: (847) 226 - 3049**

**FAX: (847) 824 - 0529**

## **Suction Pumps ( E0600 )**

**Coverage under Medicare part B** - Use of a respiratory suction pump is covered for patients who have difficulty raising and clearing secretions secondary to:

1. Cancer or surgery of the throat or mouth
2. Dysfunction of the swallowing muscles
3. Unconsciousness or obtunded state
4. Tracheotomy

Accessories and supplies are covered and are separately payable when they are medically necessary and used with a medically necessary pump in a covered setting.

Sterile suction catheters are medically necessary only for tracheostomy suctioning. No more than three suction catheters per day are covered for medically necessary tracheostomy suctioning. When a suction catheter is used in the oropharynx, which is not sterile, the catheter can be reused if properly cleansed and/or disinfected. No more than three catheters per week are covered for medically necessary oropharyngeal suctioning.

Sterile water, saline solution is covered when used to clear a suction catheter after tracheostomy suctioning. It is denied as not medically necessary when used for oropharyngeal suctioning.

**The amount you need to pay** - You pay 20% of Medicare-approved amounts.

**Important notes** - You must pay an annual deductible for Part B services and supplies before Medicare begins to pay its share.