APPLICATION STATEMENT

The application of the Clinical Coverage Guideline is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any.

DISCLAIMER

The Clinical Coverage Guideline (CCG) is intended to supplement certain standard WellCare benefit plans and aid in administering benefits. Federal and state law, contract language, etc. take precedence over the CCG (e.g., Centers for Medicare and Medicaid Services [CMS] National Coverage Determinations [NCDs], Local Coverage Determinations [LCDs] or other published documents). The terms of a member’s particular Benefit Plan, Evidence of Coverage, Certificate of Coverage, etc., may differ significantly from this Coverage Position. For example, a member’s benefit plan may contain specific exclusions related to the topic addressed in this CCG. Additionally, CCGs relate exclusively to the administration of health benefit plans and are NOT recommendations for treatment, nor should they be used as treatment guidelines. Providers are responsible for the treatment and recommendations provided to the member. The application of the CCG is subject to the benefit determinations set forth by the Centers for Medicare and Medicaid Services (CMS) National and Local Coverage Determinations and state-specific Medicaid mandates, if any. All links are current at time of approval by the Medical Policy Committee (MPC) and are subject to change prior to the annual review date. Lines of business (LOB) are subject to change without notice; current LOBs can be found at www.wellcare.com. All guidelines can be found at this site as well but selecting the Provider tab, then “Tools” and “Clinical Guidelines”.

BACKGROUND

The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit includes a comprehensive array of preventive, diagnostic, and treatment services for Medicaid eligible infants, children and adolescents under age 21, as specified in Section 1905(r) of the Social Security Act (the Act). The EPSDT benefit is also available to PeachCare for Kids® members up to 19 years of age. The EPSDT benefit is designed to assure that children receive early detection and care, so that health problems are averted or diagnosed and treated as early as possible. The goal of the EPSDT benefit is to assure that individual children get the health care they need when they need it.
States are required to arrange for and cover under the EPSDT benefit any Medicaid covered service listed in Section 1905(a) of the Act if that treatment or service is determined to be medically necessary to correct or ameliorate defects and physical and mental illnesses or conditions. This includes physician, nurse practitioner and hospital services; physical, speech/language, and occupational therapies; home health services, including medical equipment, supplies, and appliances; treatment for mental health and substance use disorders; treatment for vision, hearing and dental diseases and disorders, and much more. This broad coverage requirement results in a comprehensive, high-quality health benefit for children under age 21 enrolled in Medicaid. Examples of other services covered for children under Medicaid when medically necessary (and for which a federal match is available) include, but are not limited to, case management services (including targeted case management; incontinence supplies; organ transplants and any related services; a specially adapted car seat that is needed by a child because of a medical problem or condition; and nutritional supplements.1

POSITION STATEMENT

Applicable To:

✓ Medicaid

Coverage

Disposable incontinence products (e.g., briefs, diapers, protective underwear, pull-ons, liners, shields, guards, pads, and undergarments) are a covered benefit when the member meets the following criteria:

- Is 3-20 years old; AND
- Has chronic incontinence caused by a permanent physical or mental condition (including cerebral palsy and developmental delay).

In addition, a focused medical history and targeted physical exam have been conducted to detect factors contributing to urinary incontinence that, if treated, could improve or eliminate the member’s incontinence. Such factors include, but are not limited to:

- Symptomatic urinary tract infection (UTI, edema); OR
- Evidence of atrophic urethritis/vaginitis; OR
- Medication regimens that include diuretics, drugs that stimulate or block the sympathetic nervous system, or psychoactive medications; OR
- Medical conditions, such as delirium, fecal impaction, psychosis, diabetes, morbid obesity, delayed developmental skills, Parkinson’s disease, or other neurological diseases that affect motor skills; OR
- Environmental conditions (for example, impaired mobility, lack of access to a toilet, restraints, restrictive clothing, or excessive beverage intake); AND
- Social circumstances that prevent personal hygiene (for example, homelessness or inconsistent caregiver support for toileting).

Requests for additional units beyond the limit will require medical necessity review.

CODING

CPT Codes – No applicable codes.

Covered HCPCS Codes

A4520 Incontinence garment, any type, (e.g. brief, diaper), each
A4554 Disposable under pads, all sizes
T4521 Adult sized disposable incontinence product, brief / diaper, small, each
T4522 Adult sized disposable incontinence product, brief / diaper, medium, each
T4523 Adult sized disposable incontinence product, brief / diaper, large, each
T4524 Adult sized disposable incontinence product, brief / diaper, extra large, each
T4525 Adult sized disposable incontinence product, protective underwear / pull on, small, ea.
T4526 Adult sized disposable incontinence product, protective underwear / pull on, medium, ea.
T4527  Adult sized disposable incontinence product, protective underwear / pull on, large, ea.
T4528  Adult sized disposable incontinence product, protective underwear / pull on, extra large, ea.
T4529  Pediatric sized disposable incontinence product, brief / diaper, small / medium, each
T4530  Pediatric sized disposable incontinence product, brief / diaper, large, each
T4531  Pediatric sized disposable incontinence protective underwear / pull on, small / medium, ea.
T4532  Pediatric sized disposable incontinence protective underwear / pull on, large, each
T4533  Youth sized disposable incontinence product, brief / diaper, each
T4534  Youth sized disposable incontinence product, protective underwear / pull on, each
T4535  Disposable liner / shield / guard / pad / undergarment, for incontinence, each
T4536  Incontinence product, protective underwear / pull on, reusable, any size, each
T4537  Incontinence product, protective underpad, reusable, bed size, each
T4538  Diaper service reusable diaper, each diaper
T4539  Incontinence product, diaper / brief, reusable, any size, each
T4540  Incontinence product, protective underpad, reusable, chair size, each
T4541  Incontinence product, disposable underpad, large, each
T4542  Incontinence product, disposable underpad, small, each
T4543  Adult sized disposable incontinence product, protective brief/diaper, above extra large, ea.
T4544  Adult sized disposable incontinence product, protective underwear/pull-on, above extra large, ea.

Covered ICD-10-CM Codes

N39.3  Stress incontinence (female) (male)
N39.41  Urge incontinence
N39.42  Incontinence without sensory awareness
N39.46  Mixed incontinence
N39.490  Overflow incontinence
N39.498  Other specified urinary incontinence
R15.9  Full incontinence of feces
R32  Unspecified urinary incontinence
R39.81  Functional urinary incontinence

Coding information is provided for informational purposes only. The inclusion or omission of a CPT, HCPCS, or ICD-10 code does not imply member coverage or provider reimbursement. Consult the member's benefits that are in place at time of service to determine coverage (or non-coverage) as well as applicable federal / state laws.

REFERENCES


MEDICAL POLICY COMMITTEE HISTORY AND REVISIONS

Date   Action
10/2/2017, 12/8/2016  • Approved by MPC. No changes.
1/7/2016  • Approved by MPC. New.