

April 4, 2008

Montana Healthcare Programs Notice

Durable Medical Equipment Providers

New Codes for Disposable and Reusable Incontinence Products

Effective April 1, 2008

Listed below are new codes for disposable and reusable incontinence products. These codes are effective April 1, 2008.

For providers who have blanket denials for codes A4520 and A4335, a request for a *revised* blanket denial will need to be completed by June 30, 2008. A blanket denial is a memo sent to providers from ACS to exempt certain procedure codes from requiring third party payor information. Once you have an initial denial from the third party insurance, send it to the TPL unit at ACS and request the blanket denial.

On June 30, 2008, codes A4520 and A4335 will no longer be available. The T codes listed below are more specific to the type of incontinence products being distributed by Montana Medicaid durable medical equipment providers. These codes will be paid the “by report” percentage of 75% of billed charges. Also, maximum allowable amounts will be attached to each code. The allowables are 180 disposable diapers per month, 36 reusable diapers, underpads, liners/shields per year (3 per month), and 240 disposable under pads per month.

HCPCS Code	Description
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, each
T4526	Adult sized disposable incontinence product, protective underwear/pull-on, medium, each
T4527	Adult sized disposable incontinence product, protective underwear/pull-on, large, each
T4528	Adult sized disposable incontinence product, protective underwear/pull-on, extra large, each
T4529	Pediatric sized disposable incontinence product, brief/diaper, small/medium size, each
T4530	Pediatric sized disposable incontinence product, brief/diaper, large size, each
T4531	Pediatric sized disposable incontinence product, protective underwear/pull-on, small/medium size, each
T4532	Pediatric sized disposable incontinence product, protective underwear/pull-on, large size, 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
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 size, each
T4543	Disposable incontinence product, brief/diaper, bariatric, each

Contact Information

For claims questions or additional information, contact Fran O’Hara, DME Program Officer, (406) 444-5296 or Provider Relations:

Provider Relations toll-free in- and out-of-state: 1-800-624-3958
Helena: (406) 442-1837
E-mail: MTPRHelpdesk@ACS-inc.com

Blanket denial requests can be faxed to ACS at (406) 442-0357 or mailed to Third Party Liability, P.O. Box 5838, Helena, MT 59604.

Visit the Provider Information website:
<http://www.mtmedicaid.org>